SUPPLEMENT
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ASSOCIATION INTELLIGENCE, ETC.

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SPECIAL NOTICE TO MEMBERS.

Every member is requested to preserve this "Supplement," which contains matters specially referred to Divisions, until the subjects have been discussed by the Division to which he belongs. BY ORDER.

MATTERS REFERRED TO DIVISIONS.

ANNUAL REPRESENTATIVE MEETING AT LIVERPOOL.

FRIDAY, JULY 19TH, 1912, AND FOLLOWING DAYS.

NOTICES OF MOTION.

THE following Notices of Motion have been received for discussion by the Annual Representative Meeting of the Association, to be held at Liverpool, on Friday, July 19th, 1912, and following days:

A.—NOTICES AFFECTING THE REGULATIONS OF THE ASSOCIATION.

Resignation of Membership.

By COUNCIL:

That By-law 13 (2) be amended by the substitution of the words "three months'" for the words "one month's," in the fifth line.

[Existing By-law 13 (2):

Cessation of Membership.

(2) No Member shall (except in case of his expulsion, or of his ceasing to be a Member under the provisions of Clause (c) of the 10th Article of Association or under the previous provision of this By-law) cease to be a Member without having given one month's previous notice in writing of his intention in that behalf to the Association at the Head Office, and having paid all arrears of subscriptions (if any) due from him.]

Election by Branches.

By VICTORIAN BRANCH:

That the following Subsection (3) be added to present By-law 5 of the Association:

Where a candidate for election has been recently domiciled within the territory of an oversea Branch, election of such candidate by a Branch in the United Kingdom or another oversea Branch shall be provisional until the Council of the Branch in the previous place of domicile has been communicated with.

[Existing By-law 5:

Election by Branches.

5.—(1) In the case of a Branch in the United Kingdom the mode of election of new members shall be as follows: Every candidate who resides within the area of a Branch shall forward his application to the Secretary of such Branch. Notice of the proposed election shall be sent by the Branch Secretary to the Association at the Head Office, and to every member of the Branch Council, and the candidate, if not disqualified by any Regulation of the Association, may be elected a member of the Association by the Branch Council at any meeting thereof held not less than seven days (or such longer period as the Branch may by its Rules prescribe) after the date of the said notice. A Branch may require that each candidate for election shall furnish a certificate signed by two Members

(either of the Association, or of the Branch, or of the Division in which he resides, as the Rules of the Branch may prescribe) stating that from personal knowledge they consider him a suitable person for election.

(2) In the case of a Branch not in the United Kingdom the mode of election shall be such as may, with the consent of the Council, be prescribed by the Rules of the Branch.]

Schedule to By-laws, so far as Relating to Central Ethical Committee.

By VICTORIAN BRANCH:

That the following words be added at the end of the statement of duties, powers, etc., of the Central Ethical Committee in the Schedule to the present By-laws:

Where an ethical complaint has been dealt with by the Council of a Branch outside of the United Kingdom, an appeal to the Council of the Association shall not be allowed except by permission of the Council of the Branch.

[Extract from Schedule to present By-laws:

Duties, Powers, etc., of Central Ethical Committee.

To advise the Council on questions connected with Rules of Divisions and Branches relating to professional conduct, to investigate and report to the Council upon the cases of Members whose conduct is to be considered by the Council on the representation of Divisions or Branches pursuant to the Regulations, and generally to advise and, where so directed, act for the Council on all questions of professional conduct; also to adjudicate in matters of dispute as to professional conduct arising between Members of the Association or Members of the Profession, or at the discretion of the Committee to refer any question arising in connection with such a dispute to any Division or Branch, or to any Divisions or Branches jointly, for investigation or for adjudication subject to an appeal to the Committee; and so that any person directly concerned in such a dispute shall have a right of appeal to the Council from the decision of the Committee, and that the decision of the Committee subject to such appeal, and the decision of the Council upon any such appeal shall be binding upon the parties and upon all Members of the Association.]

Expenses of Representatives.

By EAST NORFOLK DIVISION:

That in the opinion of this Meeting the time has now come when the Council should take into consideration the payment of the necessary out-of-pocket expenses of Representatives at Representative Meetings.

[Existing By-law 71:

Expenses.

71. The expenses of any person which, in pursuance of the 39th Article of Association, are to be defrayed out of the general funds of the Association, are the first-class travelling expenses within the United Kingdom of that person.]

Local Autonomy for Australian (or Australasian) Branches.

By SOUTH AUSTRALIAN BRANCH:

That the constitution of the British Medical Association be amended:

A. So as to provide:

1. For the creation of an Australian (or Australasian) Council consisting of Members elected by the Branches in Australia (Australasia) and having such powers and duties as will enable it to administer the affairs of the Association in Australia (Australasia) in so far as such affairs are of local concern and do not affect the Association outside Australia (Australasia);

2. For the holding of General Meetings of the Members of the Association residing in Australia (Australasia);

3. For the creation of a Representative Body in Australia (Australasia), analogous to the Representative Body of the Association;

or

B. So as to provide in some other manner than that hereinbefore proposed for the federation of the Australian (Australasian) Branches with autonomy in regard to matters of Australian (Australasian) concern not affecting the Association outside Australia (Australasia).

B.—NOTICES AFFECTING THE ADMINISTRATION OF THE ASSOCIATION.

Grouping of Branches not in United Kingdom for Election of Council.

By HONG KONG AND CHINA BRANCH:

That the new arrangement of grouping of Branches not in the United Kingdom, whereby the Hong Kong and China Branch is grouped with the various Branches in India, Burma, Ceylon and Malaya for the purpose of electing one member of the Council of the Association, does not give that Branch adequate representation, and seriously curtails the rights and privileges of the Members of the Branch; that therefore one Member of Council should be allotted to the Hong Kong Branch, together with the Malaya Branch, and another Member of Council allotted to the Branches in India, Burma, and Ceylon, which Branches have interests more or less in common; and that in the event of this proposal being approved by the Representative Body the Member of Council representing the Hong Kong and China and Malaya Branches should be elected from Members of each of the two Branches alternately.

By direction of the Chairman of Representative Meetings,

ALFRED COX,
Acting Medical Secretary.

April 17th, 1912.

Meetings of Branches and Divisions.

[*The proceedings of the Divisions and Branches of the Association relating to Scientific and Clinical Medicine, when reported by the Honorary Secretaries, are published in the body of the* JOURNAL.]

BORDER COUNTIES BRANCH:

SCOTTISH DIVISION.

A MEETING of this Division was held in the Dumfries and Galloway Royal Infirmary, Dumfries, on February 16th, and continued the meeting adjourned from February 8th (see SUPPLEMENT, February 17th, p. 189). There were thirty-four members present. Dr. EASTERBROOK was Chairman.

Apologies for Non-attendance.—Apologies for absence were intimated from eight members.

Confirmation of Minutes.—The minutes of the last meeting were read and passed.

Appointment of Deputy Representative.—Dr. Robson was appointed Deputy Representative to the Representative Meeting on February 20th and 21st.

National Insurance Act.

Recommendations of Council.—The meeting then proceeded to the business on the agenda—namely, the further consideration of Report of Council D 22, and decided to take up the recommendations in order.

For Recommendation I, Dr. BELL moved:

That the Council be instructed to at once cease negotiations with the Government and the Commissioners.

Dr. MATTHEW seconded. Dr. ROBSON moved as an amendment:

That the Council be instructed, if and when approached by the Commissioners, to again place before them the further conditions absolutely necessary for securing the requirements of the profession, as embodied in the six cardinal points, adequately secured by legislation or otherwise.

Dr. MURDOCH seconded. Drs. KERR, ROSS, COOK, RODGER, BRYSON, and LIVINGSTONE took part in the debate. On a division, 19 voted for the amendment and 7 for the motion. The amendment was therefore carried.

Recommendation II: Approved.

Recommendation III: Approved.

Recommendation IV was approved after some discussion.

Recommendation V: Dr. ROBSON moved that the following rider be added to V:

> That our Representative be instructed to move or support:
>
> That members of the medical profession holding friendly society or club appointments resign such appointments on June 30th, notice of resignation being given not later than June 1st, and that those members of the medical profession who do not hold such appointments honourably pledge themselves not to take up such appointments.

Dr. LIVINGSTONE seconded. Dr. COOK moved as an amendment that the following be added to the rider:

> And that such undertaking be in the form of a legal document, duly signed and witnessed, that shall carry with it a penalty of £100 for each year of further holding such appointment.

Dr. JOHNSTONE seconded. On a division 15 voted for and 13 against the amendment. The amendment was therefore carried.

The amended rider was then carried by 21, none voting against it.

For Recommendation VI, Dr. BELL moved:

> That a State Sickness Insurance Committee be appointed to consider and report to the Council on all matters connected with the National Insurance Act; that the committee consist of twenty-four members elected by the Branches and grouped Branches in the United Kingdom, and the *ex officio* members, and that this committee be empowered to add to its numbers for several purposes not more than four additional members.

Dr. KERR seconded. Dr. HUSKIE moved as an amendment:

> That in Recommendation VI sixteen members be elected by the Representative Body and eight by the Council.

Dr. MURDOCH seconded. On a division 16 voted for the amendment and 8 for the motion. The amendment was therefore carried.

Instructions to Representative.—Dr. HUSKIE proposed:

> That the Representative be instructed to vote against a fixed charge for medical attendance; and that this should be arranged for each district separately.

This was carried by acclamation.

EAST ANGLIAN BRANCH:

MID-NORFOLK DIVISION.

A MEETING of this Division was held in the Medical Library, Norwich, on April 10th. Twenty members were present; Dr. MCKELVIE, Vice-Chairman, presided.

Confirmation of Minutes.—The minutes of the previous meeting were signed.

Norfolk Education Authority: Scale of Fees.—The meeting considered a scale of fees offered to the local profession by the Norfolk Education Authority, and sanctioned by the Board of Education. After discussion it was agreed to accept the offer of a fee of £1 11s. 6d. for operation on tonsils and adenoids in school children, including local or general anaesthesia, but not to accept the fee offered for the treatment of certain skin diseases—ringworm, scabies, impetigo—namely, 5s.; the Honorary Secretary being instructed to inform the medical officer of health and the members of the Division of this decision.

Provisional Medical Committee.—The only other important item on the agenda was the immediate formation of a Provisional Medical Committee to organize the local profession in the event of the Insurance Commissioners' regulations not fulfilling the demands of the Association under the Insurance Act. The following gentlemen were appointed as representing the various centres or districts of the Division: Drs. Colvin-Smith (Cromer), Kay (Cley), Vaughan (Diss), Douglas McKelvie (Blofield), Davidson (Thorpe), B. D. Z. Wright (Coltishall), Harrison (North Walsham), Howlett (East Dereham), Sapwell (Aylsham), Lowe (Wymondham), Owens (Long Stratton), Howard (New Buckenham). Three non-members of the Association resident in the Division were also appointed, namely: Dr. Keeling (Attleborough), Dr. Cooper (East Harling), Dr. Rackham (Elmham). Dr. Thomson, Honorary Secretary of the Division, was also appointed to start and organize the work of the Committee.

The proceedings then terminated.

NORTH SUFFOLK DIVISION.

A MEETING of members of the profession residing in the area of this Division was held at the Lowestoft Hospital on Thursday, April 4th, at 4 p.m., Dr. RANSOME presiding. There were also present Drs. Bell, Berry, Evans, Helsham, Colborne, Schilling, Chevers, Farrer, Wood-Hill, Baylie, Mitchell, Fox, Ticehurst, Hosegood, Taylor, Mead, Barraclough, Worthington, Hutchinson, Aylen, Morris, Daniells, Boswell, and Tyson (Honorary Secretary).

Confirmation of Minutes.—The minutes of the last meeting were read and confirmed.

Representative at Representative Meeting.—A vote of thanks was accorded to Dr. H. Muir Evans for acting as Representative at the Special Representative Meeting in London, and Dr. Evans was unanimously elected to represent the Division at Representative Meetings during the ensuing year.

Provisional Local Medical Committee.—The question of the composition of the Provisional Local Medical Committee in connexion with the State Insurance Act was next considered, and it was finally agreed that the committee should consist of twelve members, with power to co-opt two additional members. Some discussion as to the method of election of the committee took place, and it was agreed that the members should be elected forthwith by those present at the meeting, and the amendment by Dr. HELSHAM that the members of the committee for each district be chosen by that district by postal vote was defeated. The following were then elected members of the Provisional Committee: Drs. Bell, Evans, Hutchinson, Tyson, Helsham, Ransome, Wade, Aylen, Schilling, Acton, Baylie, and Taylor. It was agreed that the meetings of this committee should be held at Beccles, and Dr. Helsham was unanimously elected secretary of the committee. On the proposition of Dr. WORTHINGTON it was agreed that, if any member elected to serve on the above committee should not wish to stand, the committee be empowered to elect another member in his stead.

Guarantee Fund.—The CHAIRMAN called attention to the urgent necessity of hearty support being given to the Guarantee Fund, and substantial guarantees were given by several members present.

Fees for Ambulance Lectures.—The question of payment for ambulance lectures was brought up, and after some discussion it was agreed that at the next meeting a resolution should be brought forward that in future no ambulance lectures should be given by a practitioner in the Division unless he receive a suitable fee for the same. This concluded the business of the meeting.

JAMAICA BRANCH.

A MEETING was held at the Public Hospital, Kingston, on Thursday, February 22nd, at 8 p.m., when Dr. LLOYD TUCKEY read a paper and opened a discussion on hypnotism, suggestion, and psychotherapy. Dr. AYTON described a case of colitis caused by *Bacillus pyocyaneus*, treated by vaccines—apparent cure. Dr. C. H. THOMSON showed (1) a case of abdominal tumour in a child 2 years old; (2) a case of syphilis treated successfully by salvarsan.

LANCASHIRE AND CHESHIRE BRANCH:

MANCHESTER (SOUTH) DIVISION.

A GENERAL meeting of the Division was held at the Holy Innocents' Schools, Fallowfield, on Wednesday, April 3rd, at 3.30 p.m.; Dr. GRANT DAVIE presided. There were also present: Drs. Cotterill, Chevers, Edlin, Gregory, Godson, Crichton-Hood, Heathcote, Hopkinson, Jones, Martin, Mitchell, McDougall, Scott, Salter, Stocks, Thoseby, Tomkys, Webb, and Williams. Dr. P. Drummond was present by invitation—issued to all non-members.

Apologies for Non-attendance.—Dr. Whitworth and Dr. Russen Rhodes sent apologies for non-attendance.

Medical Who's Who.—A resolution passed by the Committee of the Division on March 26th in relation to a suggested *Medical Who's Who* was read. The resolution and the action taken by the Committee in sending it up to

the Central Office were formally approved by the meeting. It was decided to let further action rest with the Central Office.

Scheme for Amalgamation of Manchester and Salford Divisions.—The rules and principles were discussed. The meeting made several alterations and suggestions.

Provisional Local Medical Committees.—Dr. GRANT DAVIE gave an account of the last two committee meetings at which this subject was discussed, and at which the Committee recommended that an organization subcommittee be appointed to draw up a scheme for the election and plan of campaign of the Provisional Local Medical Committees. This recommendation the meeting decided to adopt. It also decided that the following districts should be represented by the following members, with Dr. Stocks *ex officio* member of the Committee: Heaton Chapel, Dr. Simcock; Didsbury and West Didsbury, Dr. Godson; Gorton, Dr. Martin; Levenshulme, Dr. Edlin; Longsight, Dr. Gregory; Wilmslow, Dr. Byers; Dr. Cotterill was elected Honorary Secretary of the Committee. It was decided that the expenses incurred by this subcommittee be defrayed out of the funds of the Division.

PRESTON DIVISION.

THE annual general meeting of this Division was held in the Preston Scientific Society's Rooms, on Thursday, April 11th, Dr. R. C. BROWN, President, in the chair. There were present: Drs. Garner, Petyt, Bywater, Leighton, Healey, Dunn, Hewetson, Sellers, Huntley, Rigg, W. Pimblett, Eccles, Howe, Turnbull Smith, and Sykes.

Confirmation of Minutes.—The minutes of the last annual meeting were read and adopted.

Report of Executive.—The HONORARY SECRETARY read the report of the executive, which stated that the membership on December 31st, 1910, was 53, and December 31st, 76. The statement of accounts was as follows:

Balance Sheet, 1911.

	£ s. d.		£ s. d.
In hand, December 31st, 1910	0 10 6½	Rooms	2 1 5
April grant	1 7 0	Printing	2 7 2½
July grant	2 10 0	Stationery	0 7 5
Collected by levy of 1s., November 22nd, 1911	3 16 0	Postage	2 19 2
		Clerical aid	0 4 0
			7 19 2½
		Balance	0 4 4
	£8 3 6½		£8 3 6½

Provisional Medical Committee.—Dr. SELLERS proposed that a temporary Provisional Medical Committee be formed, consisting of the executive of the Association and the Committee of the Preston Medico-Ethical Society, with power to add to their number. This was seconded by Dr. DUNN, and carried unanimously.

Election of Officers.—The following were elected officers: *President*, Dr. R. C. Brown; *Vice-Presidents*, Dr. Garner, Dr. A. C. Rayner; *Representative*, Dr. Garner; *Honorary Secretary and Treasurer*, Dr. W. Sykes; *Committee*, Dr. Sellers, Dr. Turnbull Smith, Dr. Mooney, Dr. Leighton, Dr. Dunn, Dr. Petyt, Dr. Lea.

Vote of Thanks.—Dr. DUNN, seconded by Dr. RIGG, proposed a very hearty vote of thanks to the President and Executive for the work they had done in the past year. Dr. BROWN suitably responded, and the meeting terminated.

SOUTHPORT DIVISION.

A SPECIAL meeting of the Division, to which all registered practitioners resident in the Division had been invited, was held at the Temperance Institute on April 12th to consider the advice of the State Sickness Insurance Committee that a local Provisional Medical Committee should be appointed. There were present: Dr. LITTLER (in the chair); Drs. G. R. Anderson, Baildon, Bardsley, Mewburn Brown, Colin Campbell, Lawson Cairns, Russell Cairns, de Courcy, Edmiston, Harker, Harris, Henderson, Hunton, Lewis, W. N. Maccall, Mackay, Marshall, Penrose, Pridie, Schofield, Scott, Sykes, Swete-Evans, and Weaver. Apologies were received from Drs. Woolmer Davies and Walker.

Confirmation of Minutes.—The minutes of the last meeting were read and confirmed.

Memorandum from State Sickness Insurance Committee.—The letter from the Acting Medical Secretary and the memorandum from the State Sickness Insurance Committee, together with a later explanatory letter of March 28th, were read.

Provisional Medical Committee.—It was decided to form a local Provisional Medical Committee with a membership of twenty. With due consideration to representation of the localities of the Division, the following eighteen were elected, with power to co-opt two others and fill any vacancies that may occur—namely: Drs. Barwise, S. M. Brown, Baildon, Harris, Littler, Russel, Speirs, and Sykes (members of the Executive Committee); Russell Cairns, Croft, Edmiston, Henderson, Lewis, Mulholland, Penrose, Pridie, Scott, and Wilson.

Local and Central Defence Funds.—The position of the Local Defence Fund and the Central Defence Fund was considered, and on the motion of Dr. LEWIS, seconded by Dr. SWETE-EVANS, it was decided unanimously that the balance of the guaranteed subscriptions to the local fund should be called in and the amount sent up to be placed to the credit of the Central Fund.

Branch Council as Local Co-ordinating Authority.—Another resolution was carried unanimously that the Provisional Medical Committee should recognize the Branch Council as the local co-ordinating authority.

WARRINGTON DIVISION.

A SPECIAL meeting of this Division was held at the Infirmary, Warrington, on April 12th. Dr. BOWDEN was in the chair, and there were present: Drs. Burrowes, Edwards, Bennett, Langdale, Fox, G. H. Joseph, Breakell, Brebner, McKenzie, J. P. Naden, Lindsay, Robinson, L. Thorp, Hutt, McKee, Liston, Burt, and Murray.

Provisional Medical Committee.—It was decided to form a Provisional Medical Committee for the area of the Division with the Executive Committee as a nucleus. It was decided that the committee should consist of six practitioners from Warrington, three from Widnes, and three from the Cheshire rural area, the Secretary of the Division to be an *ex officio* member. It was decided to elect the remainder of the committee at the meeting, and the voting resulted as follows:—Warrington: Drs. J. P. Joseph (the Mayor), J. P. Naden, and Fox; Widnes: Drs. Brebner and Breakell; Cheshire Rural: Drs. Jago and L. Thorpe. It was decided that the first meeting of the Provisional Medical Committee should be held on Tuesday, April 23rd, at 8.15 p.m.

METROPOLITAN COUNTIES BRANCH:

HAMPSTEAD DIVISION.

A MEETING of this Division was held on Friday, April 12th, at 8.30 p.m., at the Central Library, Finchley Road, N.W. Dr. OAKLEY was in the chair, and sixteen members were present.

Confirmation of Minutes.—That portion of the minutes relating to the resolution of March 8th to be confirmed at the present meeting (see Agenda 4) were read, the rest being taken as read; the minutes were confirmed.

Illness of a Member.—A letter from Dr. E. B. Jones, of Chatsworth, North End Road, N.W., with reference to the illness of Dr. Christmas, a member of the Association, recently moved into this Division, was read. A subscription list to aid his family, who are in urgent need of assistance, was started. (Subscriptions may be sent to the Assistant Honorary Secretary, 7, Cannon Hill, West Hampstead, N.W.).

Supplementary Report of Branch Organization Committee.—A letter from the Secretary of the Central Organization Committee, enclosing the supplementary report of the Branch Organization Committee, and requesting the opinion of the Division thereon, was read, together with that portion of the report affecting the Hampstead Division, namely:

Paragraph 2, Subparagraph (*d*):

A new Division to consist of Hendon and Finchley Urban Districts.

Paragraph 2, Subparagraph (*e*):

A new Division to consist of Willesden Urban District and Wembley Urban District, subject to the approval of its members.

Paragraph 2, Subparagraph (*f*):

Harrow to consist of the urban and rural districts of Uxbridge, urban districts of Harrow, Ruislip, and Northwood, Wealdstone, and the rural district of Hendon, together with the urban district of Wembley, if not, by its request attached to the Willesden Division.

It was proposed by Dr. MACEVOY and seconded by Mr. WARE:

That Paragraph 2, Subparagraphs (*d*) and (*e*) of the Supplementary Report of the Branch Organization Committee be approved, and that the Hampstead Division is in favour of Wembley Urban District being attached to Willesden.

This was carried *nemine contradicente.*

Confirmation of Resolution.—It was proposed by the CHAIRMAN and carried *nemine contradicente:*

That the resolution passed by the Division on March 8th, 1912:

That a new Division of the Metropolitan Counties Branch of the British Medical Association be formed, comprising the area of the Finchley and Hendon Urban Districts,

be confirmed.

Treatment of Fractures by Mobilization.—An interesting paper was read by Dr. JAMES B. MENNELL on the treatment of fractures by mobilization and massage, and at the end Dr. Mennell gave illustrations of his methods. During the discussion which followed Mr. E. E. WARE showed skiagraphs of a fractured pelvis, with good union following, and Dr. ERIC PRITCHARD gave instances of the success he had in certain cases in which he had used these methods.

Vote of Thanks.—A vote of thanks was moved by the CHAIRMAN and carried unanimously.

ST. PANCRAS AND ISLINGTON DIVISION.

A MEETING of the profession was convened by the Division and held on Friday, April 12th, at 9 p.m., at the Midland Grand Hotel. Dr. MORISON, Chairman of the Division, presided, and there were present seventy-five members of the profession.

Work of the Insurance Committee.—The CHAIRMAN invited Dr. Beaton to state the work of the Insurance Committee, and to explain the organization in the area of the Division to be sustained and further effected.

Provisional Medical Committee.—A Provisional Medical Committee was then elected consisting of four members from each parliamentary area of the two boroughs added to the Executive Committee, with Dr. Joseph Wilson as honorary secretary. It was resolved that a member of the Medical Committee of each of the five hospitals in the area of the Division should also be asked to join the committee, and it was agreed that its first meeting should be held on April 19th at the Athenaeum, Camden Road, at 9 p.m.

STRATFORD DIVISION.

A MEETING of this Division was held on Thursday, April 11th, at 9.15 p.m., at West Ham Hospital, Dr. SANDERS presiding. Forty members were present.

Paper.—The correspondence having been dealt with, Dr. RUSSELL ANDREWS read a very interesting paper on Pyelonephritis in Pregnancy. Dr. Andrews having replied to the subsequent discussion and having answered several questions, was awarded a hearty vote of thanks.

Visiting Staff of Cottage Hospitals and Fees.—Dr. BOYD ROBSON then raised the question of non-payment of fees to members of the visiting staff of cottage hospitals in cases where death ensues in the hospital and where a *post-mortem* examination is ordered. The matter was referred to the Executive Committee for consideration and report.

Stepney Tuberculosis Dispensaries.—The meeting then considered a motion by Dr. THOMAS, M.O.H. for Stepney, to the following effect, namely:

That the resolution passed by the Executive Committee relating to the Stepney Tuberculosis Dispensaries be rescinded.

He stated that the Stepney Medical Union had by an overwhelming majority approved of the establishment of the Stepney Tuberculosis Dispensaries, and desired at the same time to remain loyal to the British Medical Association. They had agreed to all the conditions laid down by the Metropolitan Branch Council (February 15th, 1912) except the last, in regard to which it was the express wish of the majority of the members in the Stepney area that an all-time medical officer should be appointed. Dr. POLAND moved a direct negative. A free discussion ensued, and, on a vote being taken, Dr. Thomas's motion was carried. Dr. J. HARLEY BROOKES then moved:

That the Medical Secretary of the British Medical Association be informed that the Stepney Division have withdrawn their objection to the insertion of the Stepney Dispensaries advertisement.

This was carried.

NORTH OF ENGLAND BRANCH:

GATESHEAD DIVISION.

A LARGE meeting, representative of all medical practitioners in the Gateshead Division, comprising Gateshead, Chester-le-Street, Low Fell, Birtley, Washington, and Dunston, was held on Saturday, March 30th, in the Bewick Hall, Gateshead, for the purpose of electing a Provisional Local Medical Committee. Dr. S. V. ROBINSON was elected chairman of the meeting.

Provisional Local Medical Committee.

The SECRETARY of the Division gave a short account of the reasons for forming such a committee, and the functions of such a committee when formed. The organization of the profession, the general need in the present crisis of all non-members becoming members of the British Medical Association, and the urgent necessity of adequately supporting the Defence Fund, were points specially put before those present.

Dr. GILBERT moved that a Provisional Local Medical Committee be now formed. This was carried unanimously, it being clearly understood that this step did not signify the intention of the profession to work under the Act, so far as its conditions were at present known; but was for the purpose of completing the organization of the profession in this area, to deal with the conditions which might arise in the event of the profession being unable to work under the regulations which are to be issued by the Insurance Commissioners.

The following gentlemen were elected by ballot, with power to add to their numbers: Drs. Crerar, Dougall, Durant, Davis, Dewar, Farquharson, Gilbert, Green, Johnson, Miller, Patton, Robinson, Stewart, and Taylor.

A meeting of the committee was held at the termination of the ordinary meeting. Dr. Durant was elected Chairman, Dr. Patton Honorary Secretary.

Dr. GILBERT moved, and Dr. FARQUHARSON seconded, that Dr. Smith be co-opted on the committee. This was carried unanimously.

Dr. STEWART moved, and Dr. GREEN seconded, that Dr. Todd be co-opted. This was carried unanimously.

It was decided to hold the meetings at the dispensary at 8 p.m., the first meeting to be held on April 10th, members to have due notice.

NEWCASTLE-UPON-TYNE DIVISION.

Provisional Local Medical Committee.—The inaugural meeting of the Provisional Local Medical Committee was held at the Royal Victoria Infirmary, Newcastle-on-Tyne, on Thursday, April 11th, at 8.30 p.m. There were present: Drs. J. Don, A. Dryden, J. MacRae, Ethel Williams, R. Dagger, J. W. Smith, sen., Bolam, Lickley, Hobbs, Geo. Foggin, Burnell, Russell, Simpson, A. Smith (Whickham), H. Morrison, Hunter, Basham, Hudson, Fraser, Ruxton, Rutter, Wilson, McCracken, and R. J. Willan. Dr. James Don was elected Chairman of the Committee; Dr. H. L. Rutter, Vice-Chairman; and Mr. R. J. Willan, Honorary Secretary. A subcommittee, representing each of the districts, was formed in order to canvass the whole of the medical profession in the area.

Dr. Adam Wilson resigned his membership, and Drs. E. B. Kitching, E. F. Pratt, T. L. Bunting, and Mr. H. Brunton Angus were co-opted members.

SOUTH-EASTERN BRANCH:

BRIGHTON DIVISION.

AN ordinary meeting of the Division, to which every practitioner residing in the area was invited, was held at the Lecture Hall, New Road, Brighton, on Tuesday, April 16th. Dr. RYDING MARSH, Vice-Chairman, took the chair, Thirty-three men were present at the meeting.

Brighton Education Committee.—The question of the appointment of two whole-time medical officers to combine the duties of inspection and treatment of school children was discussed, and the following resolution was carried *nemine contradicente:*

> That the members of the profession in this town are of opinion that the proposed additional appointment of full-time medical officers for the treatment of school children is both undesirable and unnecessary, and that they would resent the introduction of such men into the town.

Appointment of Schools Committee.—The report of the special committee appointed in November, 1910, to organize a scheme for the treatment of school children on the lines laid down in Memorandum 25 was received. It was felt very strongly by the meeting that the time had come for the appointment of a special committee of the Division to deal with the matter, so that the members might be kept in touch with the progress of negotiations by frequent reports to the Division. The Organization Committee was therefore dissolved, and a special committee appointed, to be called the Schools Committee, with instructions to deal with all matters concerning the treatment of school children and to report to the Division meeting.

West Street Hospital.—The question of West Street Hospital was postponed pending the report of the Joint Subcommittee of the Hospitals and Medico-Political Committees of the Association on the subject.

Next Meeting.—The next ordinary meeting of the Division is on May 21st, and members are asked to send in on or before that date nominations for Representatives and Deputy Representatives, for two Representatives to the Branch Council, and for the officers of the Division and the members of Executive Committee. Also any proposals for alterations in the rules and standing orders of the Division.

EASTBOURNE DIVISION.

A MEETING of this Division, to which all medical non-members residing within the area had been invited, was held in the Technical Institute, Eastbourne, on Thursday, April 4th, at 4.30 p.m. Twenty-one members and two non-members were present. In the absence of Dr. R. Frazer through indisposition, Dr. H. HABGOOD was unanimously voted to the chair.

Confirmation of Minutes.—The minutes of the last meeting were read and confirmed.

Local Provisional Medical Committees.—After briefly considering the suggestions contained in the Memorandum (D. 46) of the State Sickness Insurance Committee, the following resolutions were unanimously adopted:

1. That a Provisional Medical Committee be formed for the whole area, consisting of twenty-four members of the profession.
2. That the Executive (ten members) be incorporated as the nucleus, and the required complement (fourteen others) be elected by this meeting.

Thereafter the committee was regularly constituted by the election of fourteen general practitioners, unanimously chosen from representatives of every district in the area.

ROCHESTER AND CHATHAM DIVISION.

A MEETING was held on Friday, April 12th, at St. Bartholomew's Hospital, Rochester. Dr. HOLROYDE was in the chair, and twenty-three members were present.

Provisional Local Medical Committee.—Dr. W. A. Dartnell and the Honorary Secretary were elected to serve on the Provisional Local Medical Committee for the County of Kent.

Nomination of Representative.—Separate representation having been granted to the Division, the meeting was called for the purpose of making nominations for a Representative. Dr. HOLROYDE proposed and Dr. SMITH seconded that Dr. C. Courtenay Lord be elected. There being no other nomination Dr. Lord was declared elected Representative for the Division, to take office from the next annual general meeting of the Association. Dr. Lord thanked members present very sincerely for the great honour they had done him in electing him to such an important post.

Public Medical Service.—Dr. COUMBE then read a paper on a public medical service, and several members took part in the discussion which followed.

Central Defence Fund.—An urgent appeal was made for better support of the Central Defence Fund, which resulted in seventeen members raising their guarantee to £10.

Conference with Local Friendly Societies.—The following resolution was then proposed by Dr. LORD and seconded by Dr. BARNES:

> That this meeting be urged to appoint a small committee to confer with officials of the local friendly societies on the present position of contract practice without delay.

The resolution was carried *nemine contradicente*, and a subcommittee was appointed.

Vote of Thanks to Chairman.—The proceedings terminated with a vote of thanks to the Chairman.

British Medical Association.

SCHOLARSHIPS AND GRANTS IN AID OF SCIENTIFIC RESEARCH.

SCHOLARSHIPS.

THE Council of the British Medical Association is prepared to receive applications for Research Scholarships, as follows:

1. AN ERNEST HART MEMORIAL SCHOLARSHIP, of the value of £200 per annum, for the study of some subject in the department of State Medicine.
2. THREE RESEARCH SCHOLARSHIPS, each of the value of £150 per annum, for research into some subject relating to the Causation, Prevention, or Treatment of Disease.

Each Scholarship is tenable for one year, commencing on October 1st, 1912. A Scholar may be reappointed for not more than two additional terms.

The conditions of the award of Scholarships are stated in the Regulations, a copy of which will be supplied on application to the Acting Medical Secretary of the Association, 429, Strand, London, W.C.

GRANTS.

The Council of the British Medical Association is also prepared to receive applications for Grants for the assistance of Research into the Causation, Treatment, or Prevention of Disease. Preference will be given, other things being equal, to members of the medical profession and to applicants who propose as subjects of investigation problems directly related to practical medicine.

The conditions of the award of Grants are stated in the Regulations, a copy of which will be supplied on application to the Acting Medical Secretary of the Association, 429, Strand, London, W.C.

Applications.

Applications for Scholarships and Grants for the year 1912–13 must be made not later than Tuesday, June 11th, 1912, in the prescribed form, a copy of which will be supplied by the Acting Medical Secretary on application.

Each application should be accompanied by testimonials, including a recommendation from the head of the laboratory, if any, in which the applicant proposes to work, setting out the fitness of the candidate to conduct such work, and the probable value of the work to be undertaken. This is not intended, however, to prevent applications for Grants in aid of work which need not be performed in a recognized laboratory.

ALFRED COX, *Acting Medical Secretary.*

429, Strand, London, W.C.,
March 30th, 1912.

To ensure the insertion of notices in this column they must be received at the Central Offices of the Association not later than the first post on Tuesday.

Association Notices.

COUNCIL MEETING.

THE Quarterly Meeting of the Council will be held at 2 o'clock in the afternoon of Wednesday, May 1st, in the Council Room at 429, Strand, London, W.C.

By Order,

GUY ELLISTON,

Financial Secretary and Business Manager.

March 28th, 1912.

NOTICE OF CHANGE OF BOUNDARIES OF DIVISIONS.

OXFORD AND READING BRANCH.

Oxford and Reading Divisions.

THE following change has been made in accordance with the Regulations of the Association, and takes effect from the date of publication of this Notice:

That Newbury, Hungerford, Kintbury, Enborne, Speen, and Donnington be transferred from the Oxford to the Reading Division of the Oxford and Reading Branch.

BRANCH AND DIVISION MEETINGS TO BE HELD.

BATH AND BRISTOL BRANCH.—The sixth ordinary meeting of the session will be held at the Museum, Bath, on Wednesday, April 24th, 1912, at 8 p.m., Dr. George Parker, President, in the chair. The following communications are expected: (1) G. H. H. Almond, M.B.: Multiple Tenosynovitis. (2) W. P. Kennedy, M.D.: Some Controlling Factors in the Circulatory Mechanism. (3) Hugh P. Costobadie: The Ear, Nose, and Throat in General Practice. (4) J. Michell Clarke, M.D.: Case of General Infection by Influenza Bacillus.—W. M. BEAUMONT, NEWMAN NEILD, Honorary Secretaries.

BIRMINGHAM BRANCH: CENTRAL DIVISION.—The annual meeting of the Division will be held at the Medical Institute on Wednesday, May 15th, at 4 p.m., to elect officers for the ensuing year, and to transact other business. Nominations for the offices of Chairman, Vice-Chairman, and two Honorary Secretaries, in writing, signed by three members of the Division, must be forwarded to the Honorary Secretaries not later than April 24th.—W. TRACY LYDALL and B. C. R. ALDREN, Honorary Secretaries, Medical Institute, Birmingham.

EAST ANGLIAN BRANCH.—The spring meeting of the Branch will be held at East Dereham on Thursday, April 25th. Members wishing to read papers or show specimens or cases should communicate with Mr. HAMILTON A. BALLANCE, M.S., Honorary Secretary for Norfolk.

GLASGOW AND WEST OF SCOTLAND BRANCH.—The annual general business meeting of the Branch will be held in the Pathological Institute of the Royal Infirmary, Glasgow, on Wednesday, May 8th, at 4 p.m. Professor Teacher will give a Pathological Demonstration after the general business has been transacted.—WM. D. MACFARLANE, Honorary Secretary.

METROPOLITAN COUNTIES BRANCH: MARYLEBONE DIVISION.—*National Insurance Act.*—A meeting of the medical practitioners of the Borough of Marylebone will be held at No. 11, Chandos Street, W. (Medical Society of London), on Thursday, April 25th, 1912, at 4.30 p.m., to elect a special committee to watch the interests of the medical profession of the borough, and to adopt rules for its guidance. It is proposed that this "Provisional Local Medical Committee" should consist of twenty practitioners, ten in general and ten in consulting practice. Members of the Division are invited to send in nominations for members of this committee. A candidate must be a registered medical practitioner practising in the borough. The nomination must be signed by two other such practitioners, and accompanied by the signed consent of the nominee to serve. Nominations must reach the Honorary Secretary by Wednesday, April 24th.

General Meeting.—A general meeting of the Division will be held at the rooms of the Medical Society of London, 11, Chandos Street, W., on Thursday, April 25th, at 5 o'clock p.m., or as soon after that hour as possible. Agenda: (1) Minutes (BRITISH MEDICAL JOURNAL, SUPPLEMENT, March 16th, p. 325). (2) Questions. (3) Letters. (4) Report of Special Committee appointed to consider the relation of medical officers of hospitals to the Insurance Act. The committee recommends the adoption of the following resolutions: "The Marylebone Division considers that since medical practitioners, including consultants, have signed the declaration of the British Medical Association, and have given their adhesion to the policy of the Association, it is at the present juncture inadvisable to prepare or require any further declaration from any section of medical practitioners." "That it be a recommendation to the staff of voluntary hospitals to approach their governing boards so as to secure that no medical treatment shall be given to insured persons under the Act at the hospitals, either gratuitously or for pay, except on terms satisfactory to the medical profession." Mr. Douglas Drew will move accordingly. (5) Notice concerning the election of officers for the ensuing year. *Divisional Officers:* Nominations for the offices of Chairman, Vice-Chairman, Treasurer, Honorary Secretary, and the Representatives on the Branch Council (number not yet known) must reach the Honorary Secretary by May 1st. *Branch Council:* Proposals to nominate officers by the Division (President, four Vice-Presidents, Treasurer, two Honorary Secretaries) should reach the Honorary Secretary by May 1st. *Central Council:* Proposals to nominate by the Division should reach the Honorary Secretary by May 1st. Nominations must be signed by two members and accompanied by the signed consent of the candidate to act.

Special Meeting.—A special meeting of the Division will be held on Thursday, April 25th, immediately after the conclusion of the general meeting to amend the Divisional rules. The Executive Committee recommends the following alterations: Rule 4. Representatives in the plural; add the phrase "not less than six other members." Rule 5. Add the phrase "The Secretary shall be one of the Representatives at the Representative Meetings." Rule 6. The officers and Representatives shall be elected annually in the annual general meeting of the Division. . . . Candidates for office shall be nominated by the Executive Committee or by any two members of the Division. Nominations must be in writing and accompanied by the consent of the candidate to serve, and must reach the Honorary Secretary not later than May 1st in each year. . . . Voting shall be by ballot, unless a demand for a postal vote signed by twenty members be received by the Honorary Secretary not less than ten days before the date of the meeting, when the vote shall be taken by post card, returnable on the day prior to the meeting. Rule 7. The Representatives of the Division in the Representative Meeting of the Association shall be elected at the annual general meeting of the Division, as provided in Rule 6. (*a*) Representatives shall attend at any meeting of the Division called for their instruction (Rule 12). Any Representative failing to attend such meeting, or who shall be unable or unwilling to attend the Representative Meeting shall be replaced by a deputy nominated and elected by ballot at the meeting in question. (*b*) Any Representative who has failed to attend a Representative Meeting, either personally or by authorized deputy, shall be ineligible for re-election for one year. Any member who shall have served as such Representative for five years consecutively shall be ineligible for re-election for one year. (*c*) The Honorary Secretary shall send a special notice of any meeting called under Rule 12 to each Representative, together with a copy of By-law 39 (3) of the Association. Rule 8 (*d*). Quorum, five. To number the rule appertaining to the annual meeting, No. 11, and to correct the number of Rules 11, 12, 13, to 12, 13, 14 respectively. To new No. 12 omit "Annual" and read "Meetings" in plural. Add: (*b*) A meeting of the Division shall be convened as soon as possible after the Representative Meeting to receive the report of the Representatives. The Honorary Secretary will move accordingly. The Honorary Secretary will send a copy of the current rules to any member on receipt of a stamped addressed envelope.—N. BISHOP HARMAN, Honorary Secretary.

METROPOLITAN COUNTIES BRANCH: SOUTH-WEST ESSEX DIVISION.—The next meeting of the South-West Essex Division will be held on Thursday, April 25th, at the Walthamstow Hospital, at 4 p.m.—Agenda: (1) Minutes. (2) Correspondence. (3) Lantern Demonstration on Constipation, by Dr. A. Hertz, Assistant Physician, Guy's Hospital. (4) Any other business.—A. POTTINGER ELDRED, Honorary Secretary.

STAFFORDSHIRE BRANCH.—The third general meeting of the session will be held at the Victoria Hotel, Wolverhampton, on Thursday, April 25th, 1912. The President, W. D. Spanton, F.R.C.S., will take the chair at 5.35 p.m. Business: (1) Minutes of the last general meeting. (2) Correspondence. (3) Exhibition of Living Cases. (4) Papers: H. C. Mactier: The Indiscriminate Use of Atropine in Eye Diseases; C. A. Stidston: The Medical Directory. (5) Exhibition of Pathological Specimens, etc. Dinner at 7 p.m.; charge 5s.—HAROLD HARTLEY, Honorary General Secretary, Stoke-on-Trent.

WORCESTERSHIRE AND HEREFORDSHIRE BRANCH.—The spring meeting of this Branch will be held at Worcester on April 25th. Members wishing to read papers, exhibit specimens, or show cases are requested to kindly communicate with the Honorary Secretary without delay. It has been suggested that members should dine together after the meeting.—C. S. MORRISON, Honorary Secretary.

ANNUAL MEETING, LIVERPOOL, 1912.

PATHOLOGICAL MUSEUM.

Chairman of Committee: F. T. PAUL, Ch.M.

Honorary Secretary: ERNEST GLYNN, M.D.

Ex-Officio Members:

THE PRESIDENT-ELECT (Sir James Barr, M.D., LL.D.).

The LOCAL HONORARY TREASURER (T. H. Bickerton, Esq.).

The LOCAL HONORARY SECRETARIES (F. H. Barendt, M.D., K. A. Grossmann, M.D., W. Thelwall Thomas, Ch.M.).

THE Committee appointed to organize the Museum invites material for it under the following heads:

I. Exhibits bearing on discussions and papers in the various sections.

II. Specimens and illustrations relating to any recent research.

III. Instruments relating to clinical diagnosis and pathological investigation.*

IV. Specimens on particular subjects chosen for special illustration in certain of the sections as indicated below.

The Committee has decided to form fourteen sections of the Museum and has chosen certain subjects for special illustration:

Subjects for Special Illustration.

1. Alimentary System.—Congenital deformities; alimentary, biliary, and pancreatic concretions; specimens of oesophagus, including foreign bodies, also instruments* for the diagnosis and treatment of such diseases.
2. Anaesthetics.—Modern anaesthetic apparatus.*
3. Cardio-vascular System.—Neoplasms and granulomata of the heart.
4. Dermatology.—Syphilitic and tuberculous affections of the skin; the results of treatment with carbon dioxide snow.
5. Genito-urinary System.—Specimens illustrating the etiology of hydronephrosis; tumours *in* the adrenal gland.
6. Gynaecology and Obstetrics.—Inflammatory diseases of the uterine appendages; sarcoma of the uterus.
7. Haemopoietic System.—Diseases of the thymus gland.
8. Laryngology, Rhinology, and Otology.
9. Locomotor System and Orthopaedics.
10. Neurology.—Tumours of the pituitary gland; specimens illustrating the pathology of hydrocephalus.
11. Ophthalmology.—Irido-cyclitis and its pathology.
12. Radiography.—Specimens illustrating diseases of the stomach.
13. Respiratory System.—Pulmonary embolism and thrombosis; syphilis of the lung.
14. Tropical Medicine.—Leprosy and Leishmaniasis.

The Committee desires to enlist the hearty co-operation of members, and wishes it to be understood that the above are only suggestions. Specimens illustrative of other conditions will be welcomed.

The Museum will occupy a central position in a fire-proof building surrounded by the lecture rooms, in which the Sectional work is carried on, and will be easy of access.

Every care will be taken of the specimens, and the contents of the Museum will be insured.

The Committee is prepared to make arrangements for a limited number of short special demonstrations in the Museum at stated hours.

All communications should be addressed to Dr. Ernest Glynn, Honorary Secretary, at the Thompson Yates Laboratory, University of Liverpool.

BRITISH MEDICAL ASSOCIATION LIBRARY.

BOOKS NEEDED TO COMPLETE SERIES.

THE Librarian will be glad to receive any of the following volumes, which are needed to complete series in the Library:

American Association of Genito-Urinary Surgeons. Transactions. 1906.
American Climatological Transactions. Vols. 1, 4, 5, 6.
American Dermatological Association Transactions. Vols. 5, 7, 8, 11, and 29.
American Journal of the Medical Sciences. New series, vols. 4, 5, 1842–3; vols. 14, 15, 1847–8; vols. 18–30, 1850; vol. 33, 1857; vol. 46, 1864–5; vol. 59; or any parts of these vols.
American Journal of Ophthalmology. Vols. 1–9.
American Laryngological Association. Transactions. Vols. 1–6, 8–9.
American Medical Association. Transactions, 2, 4, 6, 7, 11, 12, 14, 15, 16, 19, 20, 22, 31, after vol. 33, and the *Journal*, up to 1903 inclusive.
American Medico-Psychological Association. Transactions. Vol. 13, 1906.
American Otological Society. Transactions. Vol. 3, part 2, 1883.
American Public Health Association. Transactions. Any vols.
Analyst. Vols. 1–24.
Annals of Surgery. Vols. 13, 14, 26.
Archiv für Dermatologie und Syphilis. Bd. 24 and 25 (1892 and 1893).
Archives générales de médecine. Third new series 7–8 (1839–40); 4th series, 10–17, 20–25, 1852–55, 1858–64, 1872–1897; 1846–55 inclusive; 1857–64 inclusive; 1871.
Archives of Ophthalmology. Vols. 1–3, 6, 7, 14, 15, 16 and 20.
Archives of Otology. Vols. 1–7, and 20–22.
Archives de Parasitologie. Vols. 1–8.
Archives of Pediatrics. Vols. 1–16.
Asylum Journal of Mental Science. Vol. 1, 1854.
Biochemical Journal. Vols. 1–4.
British Dental Journal. Vols. 1–29.
Biometrika. Vols. 2–6.
British Journal of Dermatology. Vol. 2, part 3.
British Laryngological and Rhinological Association. Transactions 1896–7–8–9.
Caledonian Medical Journal. Vol. 1 prior to 1894.
Canada Medical Journal. Vols. 1–4, 6, and after 8.
Carmichael Essays. Rivington, 1879.
Centralblatt für Augenheilkunde. Hirschberg. All prior to 1891; Index to 1891.
Centralblatt für Bakteriologie. Bound volumes prior to 1899.
Centralblatt für medicinische Wissenschaften. Vols. 1–19.
Centralblatt für Nervenheil kunde. 1878, 1879, 1886, 1889, 1890, 1892, and since 1893.
Congrès Français de Chirurgie. Transactions 1, 2, 3, 6, and 10, and all since 11th.
Congrès Internat. d'Obstétrique et de Gynécologie. 3. Amsterdam, 1899.
Congress für innere Medicin: Verhandlungen. 1–12, and 14, and since 18.
Dermatological Congress. Vienna, 1892.
Dermatologischer Jahresbericht, 1906–1908.
Dermatologische Zeitschrift. Vols. 1–16.
Dublin Quarterly Journal of the Medical Sciences. Vols. 1, 10, 17, 20, 28, and 35–40.
Edinburgh Obstetrical Transactions. Vol. 5.
Glasgow Medical Journal. 1833 and 1853–1868.
Glasgow Pathological Society. Transactions 1 and 2.
Guy's Hospital Gazette. Nos. 1 and 5. 1872.
Indian Medical Gazette. 1868–1884.
Intercolonial Medical Journal, Australasia. Vols. 1–13.
International Congress on Alcohol. Proceedings of First to Eleventh.
International Congress of Genetics. Transactions. (1) London 1899, (2) New York 1902, (3) London 1906.
International Congress of School Hygiene. Transactions of First Congress, Nuremberg.
International Congress of Hygiene. Transactions of Congresses 1–6 and 10–12.
International Medical Congress. Budapest, 1909. Section 4, Part 2; Section 7B, Part 1; Section 15, Part 2.
International Ophthalmological Congress. Transactions of Fifth; New York, 1876.
Jahrbuch für Kinderheilkunde. Bd. 1–9.
Jahresbericht Neurologie und Psychiatrie, 6 and 11–14.
Janus. All vols., 8–15.
Journal of Association of Military Surgeons. Vol. 19, 1905.
Journal of Laryngology. Vols. 1–9.
Journal of Medical Research. Vols. 1–20.
Lakeside Hospital Clinical and Pathological Papers, Series 2.
Laryngoscope. Vols. 1–20.
Liverpool Medico-Chirurgical Journal. Nos. 15, 16, 28, 29, 35, and 37–54.
London Hospital Gazette. Vols. 1–6.
Medical Officer. Vols 1 and 2.
Montreal Medical Journal. Vols. 1–16.
New York Pathological Society. Proceedings prior to 1888, 1890, 1892–1898, 1901–1904.
New York State Journal of Medicine, 1906.
Ophthalmic Review. January, 1882.
Ophthalmoscope. Vols. 1–8.
Pediatrics, prior to 1902.
Provincial Medical and Surgical Journal. March to September, 1841.
Ramazzini, Diseases of Tradesmen. Translated by James.
Recueil d'ophtalmologie, prior to 1893.
Revue de gynécologie, 1–16, Pozzi.
Revue générale d'ophtalmologie, prior to 1893.
Revue neurologique, prior to 1893 and since that date.
St. Bartholomew's Hospital Gazette. Vols. 1–6.

* Exhibits in the Pathological Museum of instruments and apparatus can only be accepted from medical men.

National Insurance.

SCOTTISH MEDICAL INSURANCE COUNCIL.

THE first meeting of the Scottish Medical Insurance Council was held in the Hall of the Royal College of Surgeons, Edinburgh, on Friday and Saturday, April 12th and 13th.

This meeting was the outcome of a conference which was held on January 20th last, composed of representatives of the Medical Faculties of the Scottish Universities; of the Councils of the Royal College of Physicians and the Royal College of Surgeons of Edinburgh; and of the members of the Scottish Committee of the British Medical Association, at which it was decided to form a Scottish Medical Insurance Council. The object in forming the Council was to consolidate medical opinion and to act for the profession in the promotion and maintenance of its interests as these will be affected by the National Insurance Act.

To this, the first meeting of the Scottish Medical Insurance Council, there were present 58 direct representatives appointed by the medical practitioners in Scotland in the insurance areas, 2 representatives from the medical faculty of each of the four Scottish Universities, 5 representatives from each of the Scottish Medical Corporations, while the Scottish Committee of the British Medical Association was represented by all its members, numbering 16.

The election of the representatives from the insurance areas was effected through the organization of the British Medical Association. Of the 58 direct representatives 54 were present, including representatives from Caithness to Wigtownshire.

Chairman and Deputy Chairman.

The meeting elected Dr. William Russell, Edinburgh, one of the representatives of the Royal College of Physicians of Edinburgh, Chairman, and Dr. Robert C. Buist, Dundee, one of the members of the Scottish Committee of the British Medical Association, Deputy Chairman of the Council.

Increase of Members.

The meeting decided that there should be increased representation from the larger towns and insurance areas; also that two medical women should be invited to join the Council.

Executive Committee.

An Executive Committee consisting of representatives proportionally appointed from all the bodies interested was elected, and it was given powers to appoint sub-committees, which will deal with contract practice in the colliery and other insurance areas, etc.

Organization of the Profession.

After the technicalities involved in the constitution of the Council had been disposed of, the Council proceeded to deal with the policy that the profession should adopt in connexion with the National Insurance Act.

It was determined that the insurance areas should be regarded as units for the purpose of organization, and that in each area Provisional Medical Committees should be elected by the medical practitioners in the areas. Upon these committees is to fall the responsibility of organizing the profession in the respective areas, and they were instructed to report from time to time to the Executive Committee of the Scottish Medical Insurance Council, and not to enter into any dealings or relations with any of the authorities under the Insurance Act without receiving the sanction of the Executive Committee.

On Friday the Council sat from 3.30 p.m. to 11.30 p.m., with an interval of two hours for dinner.

Resolution of Protest.

The Council resumed its sittings at 9.30 a.m. on Saturday morning, when the following motion by the President of the Royal College of Surgeons, Edinburgh, seconded by the President of the Royal Faculty of Physicians and Surgeons, Glasgow, was unanimously passed:

> That this body, elected by the whole of the medical profession in Scotland, and representing all branches of the profession, desires to place on record, on the occasion of its first meeting, its complete sympathy with the widespread dissatisfaction and regret that the profession should not have been adequately consulted at any stage with regard to the provisions of a measure introduced ostensibly in the interests of the public health.

Disciplinary Powers Under the Act.

The meeting affirmed its adherence to the six cardinal principles originally adopted by the medical profession, and agreed that there be added thereto a seventh, namely:

> Disciplinary powers to be vested in some properly constituted medical body.

Communications with Scottish Commissioners.

The Council resolved to inform the Scottish Commissioners at once of its constitution, and of its representative character, and to inform them of its strong disapproval of the action of the Scottish Commissioners in appointing medical members of the Advisory Committee without reference to the wishes of the profession. As the Council represents the profession in Scotland, it was held that it should have the privilege of nominating six members on the Advisory Committee. It was further resolved that the Commissioners be informed that any application for information as to statistics in regard to medical practice which they may require ought to be addressed to the Scottish Medical Insurance Council, and not to individual members of the profession.

Public Medical Service.

The meeting further approved of the proposal that in the event of the possibility of the seven cardinal principles, approved and adopted, not being incorporated in the Regulations issued by the Commissioners, that the Executive of the Council should at once take steps to prepare a scheme for a Public Medical Service, adapted to the circumstances of the various areas in Scotland, to be organized and carried on by the profession.

The sederunt lasted till 2.30 p.m.

Communications in connexion with the Scottish Medical Insurance Council should be addressed to the Acting Secretary, 54, George Square, Edinburgh.

MEETINGS OF THE PROFESSION.

SHOREDITCH MEDICO-ETHICAL SOCIETY.

THE first general meeting of this society was held at the Holborn Restaurant on April 12th, at 10 p.m. Twenty-three members and friends had supper together, Dr. MAJOR GREENWOOD being in the chair. Among those present were: Drs. F. J. Smith, Southcombe, Porter, Chubb, O'Dwyer, Withers Green, Dourno, Chetwood, Garrett, Fettes, Hammond, Speed, and Dixon.

The CHAIRMAN reported that a meeting of the Executive Committee had been held since the formation of the society; a set of rules then drafted had been printed on the notice convening the present meeting. The rules were unanimously adopted.

Dr. PORTER (honorary secretary) said that every practitioner residing in the area of the borough of Shoreditch had signified his or her intention of joining the society.

Dr. F. J. SMITH proposed the toast of "The Shoreditch Medico-Ethical Society." He congratulated them on their splendid success in enrolling all the local practitioners. If other boroughs would only do likewise there would be little difficulty in dealing with the Insurance Act in the metropolitan area. With regard to the proposed Provisional Medical Committees, he thought there was some obscurity with regard to the exact areas they would represent.

The CHAIRMAN, in returning thanks for the society, said that a great deal of the success was due to the admirable manner in which the honorary secretary (Dr. Porter) had canvassed the district. The profession was much indebted to him, and it was certain that very little could be done, unless individual practitioners could be found to give their time and labour for the general interest. The areas represented by the Provisional Medical Committees would only represent the areas of the present metropolitan Divisions of the British Medical Association, but if the Act was accepted by the profession, it would not be difficult to form out of them the various medical committees required by the Act. He did not think the profession would accept the Act, and the organization would be chiefly required to enforce reasonable terms on the friendly societies.

Dr. SOUTHCOMBE (Honorary Secretary City Division) explained that a committee of the Division had selected Dr. Porter and Dr. Chetwood as candidates to be put before the meeting next week at the Shoreditch Town Hall to represent that borough. This choice would have been left to the society, but it was not in existence at the time the selection was made.

The members present unanimously endorsed the selection of candidates made by the Division.

Dr. PORTER proposed the "Guests," and specially emphasized the services to the profession that had been rendered by Dr. F. J. Smith and Dr. Southcombe. Dr. DOURNO replied.

Dr. SPEED spoke of the advisability of demanding "payment for work done" rather than "capitation payment," and asked the Chairman if that point might be discussed at the present meeting.

The CHAIRMAN said that the lateness of the hour precluded it, but that it would be an important point for discussion at future meetings.

Dr. ROSS moved a vote of thanks to the Chairman, which was carried with musical honours.

GREENWICH DIVISION.

FORMATION OF PROVISIONAL MEDICAL COMMITTEES.

A MEETING of the practitioners of Deptford, Greenwich, and Lewisham was held on March 27th, Dr. C. J. PARKE, President of the Greenwich Division, being in the chair.

At this meeting the Provisional Committees were elected for the boroughs of Deptford, Greenwich, and Lewisham.

Deptford.

The first meeting of the Provisional Committee for Deptford was held at 91, Breakspears Road, by kind invitation of Dr. C. J. Parke, and the officers elected and the number of the committee completed as follows: *Chairman*, C. J. Parke; *Secretary*, W. H. Payne; *Members*, A. M. Dodd, J. P. Walsh, C. G. Gooding, C. G. Wallis, J. Round, W. Scott, W. S. Carpenter, A. E. Crabbe, Rosa Ford, E. O. Cox, J. B. C. Blatchley, and A. Kirby.

Memorandum D 46 was considered, and it was arranged that active canvassing be started at once.

Lewisham.

A meeting of the Lee and Blackheath Subcommittee of the Lewisham (Provisional) Medical Committee was held on April 12th, when a personal canvass was instituted to induce all medical practitioners in the district who are not members of the Association to join the Association, sign the undertaking, and contribute to the Insurance Defence Fund.

A canvass was also undertaken to obtain signatures to the local guarantee adopted by the Lewisham Medical Committee "not to accept any work under the National Insurance Act or any other medical contract work at lower terms than those sanctioned by the British Medical Association."

Dr. EDGAR DU CANE (177, Brownhill Road, Catford, S.E.), Honorary Secretary, Lewisham Provisional Medical Committee, sends us the following copy of a reply he has received to an application to the National Insurance Commissioners for England for information as to the date of issue of the regulations for medical benefits, and as to the probable date of the formation of a District Insurance Committee for the Borough of Lewisham:

[*Copy.*]

National Health Insurance Commission (England),
Buckingham Gate, London, S.W.
April 16th, 1912.

Sir,

With reference to your letter received on the 12th inst., I am directed by the National Health Insurance Commission (England) to state that the Regulations for the administration of Medical Benefit are under consideration, and the date of their issue cannot at present be stated. With regard to the formation of the Insurance Committee for the Metropolitan Borough of Lewisham I am to point out that under the proviso Section 59 (4) the formation of District Committees will depend in the first instance on the scheme to be prepared by the Insurance Committee of the County, subject to the approval of the Commissioners, and subject to the Regulations to be made under that Section. These Regulations have not yet been issued, but intimation of them will be given in due course when issued.

I am, Sir, your obedient servant,
L. S. BROCK.

Hon. Secretary,
Lewisham Medical Committee,
177, Brownhill Rd., Catford, S.E.

SOUTH-EAST ESSEX.

AT a meeting of general practitioners of South-East Essex, held on April 16th, the following resolution was unanimously carried:

> That inasmuch as the British Medical Association can only administer a fund for defence purposes, which being voluntary has no fixed capital value, this meeting of the medical men of South-East Essex strongly urges the Association to advise its members to join the Medical Federation, Limited, or else to give adequate reasons why members should not join that body.

BUTESHIRE.

A MEETING of the medical practitioners in Buteshire was held in the Victoria Hospital, Rothesay, on Thursday, February 15th. There were present Drs. Marshall, Berwick, A. J. Hall, Lawson, Penney, J. S. Hall, and MacRury (Millport). Intimations of inability to be present were read from Drs. Rutherford and Jamieson, both of Arran.

Provisional Local Medical Committee.—It was agreed to form a Provisional Local Medical Committee. Dr. LAWSON proposed, and Dr. PENNEY seconded:

> That Dr. Marshall be made Chairman.

This was unanimously agreed to. Dr. LAWSON proposed, and Dr. BERWICK seconded:

> That Dr. J. S. Hall be appointed Secretary.

This was also agreed to.

Payment for Medical Attendance under the Act.—A discussion took place concerning medical payment under the Insurance Act—capitation as against payment for work done. It was resolved:

> That the medical men of the county of Bute consider that the method of payment per attendance is the one most suitable for their district; but that, in their opinion, the provision for medical benefit suggested by Government is quite inadequate.

It was agreed that this committee would not negotiate with any Insurance Committees before communicating with the local co-ordinating authority.

The meeting was arranged by Dr. Marshall, who sent postal notices to all the members of the profession in the county about a week before the date of the meeting. It was deemed advisable that in this area the local Medical Committee should consist of all the medical men in the area, which is a scattered one. The number then is fourteen.

CORRESPONDENCE.

[*It is particularly requested that communications intended for publication should be written on one side of the paper only, and should be addressed to the Editor,* BRITISH MEDICAL JOURNAL, *429, Strand, London, W.C.*]

A NATIONAL MEDICAL SERVICE.

DR. MILSON RUSSEN RHODES (Didsbury, Manchester), writes: Now that it appears evident that the Commissioners will not grant the reasonable demands of the medical profession, and that medical men are casting about for some organized scheme of national medical aid, it is well to call a halt and to look round whether or not either the Government or the medical profession are taking the right direction.

It hardly needs argument to prove that the medical profession exists for the sake of the national health. Why, then, is the national health left in the hands of the lay public under all existing systems, with the incalculable loss of life to young and old such means at the present time—as any general practitioner and hospital physician or surgeon could abundantly testify if he wished? For under all existing systems—and this late National Insurance Act is no exception—it is left to the public to call in the doctor, and so often too late. Let me give one instance of the call of a medical man to a fine intelligent boy of 6—the old-fashioned Paul Dombey type—delicate of tissue, refined and over-active of mind, and, alas! too intelligent, with a mind and heart too big for the frail little body, and the beautiful and fine spirit shining through the eyes having but a slight hold on this world through the delicate little body; indeed, a child presenting in a word the dreaded tuberculous diathesis so well known to the physician. But the boy has never in all its 6 years, even from birth when attended by a midwife under the pernicious system organized ten years ago, come under observation of a medical man.

How the people love such a little lad and his old-fashioned, thoughtful sayings, far in advance of his years! They draw him out and take from his nerve-energy, already constitutionally deficient. The child contracts measles, and the parents, being poor, see him through it themselves without the aid of a doctor, confine him to a room for the accompanying cold or catarrh, shut up windows and door—and the tubercle at all times with us have just the constitution, debilitated system, frail soil and environment they want for their growth, and as the measles is recovered from the tubercle bacilli have firm hold of the vital parts of the body. Thus the doctor is called in too late to soothe as well as he can the last days of a child suffering from tuberculous meningitis and peritonitis, and to sign the death certificate, "Acute general tuberculosis," which closes the scene.

Why is the cry of the little ones thus dying daily in our midst not heard? Why is this great loss to the nation of life in instances such as these and in hundreds of other ways? Because of the perpetuation of a system intrinsically bad.

From the moment of birth, and even before, until adult life, the growing child should be under medical observation—not merely when it goes to school, but, most important time of all, before that, in the first few years of life, when only a midwife with a three months' training has seen it under present systems.

The nation has now a splendidly equipped medical profession, and it may be news to some of the public that there is now a standard below which no college or university can go, so that in every medical man turned out nowadays the public has a complete assurance of such efficiency as never existed in the old days.

It is indeed time that there should be one State examination carrying with it the title of "Doctor of Medicine," and fitting the medical man for any position in the public service, in practice, or hospital, and doing away with the multitude of different degrees, leaving some men, who are handicapped in their youth, handicapped all their lives. Why is not this efficient medical service placed at the service of the public? The way is easy and simple:

1. Let the medical profession be made a branch of the Civil Service with salaries ranging from £400 to £1,000 per annum.
2. Let every medical man be placed on that service and let the one State examination fit him for that service.
3. Let every householder or lodger already in or coming into a neighbourhood put his name down to the medical man of his choice.
4. Let such medical man's duty be to call on and see such household and note where constitutional tendencies, such as indicated above, exist, and where medical or surgical assistance is needed; and thus his duty will be the prevention of disease and the maintaining the health of his patients.
5. Let such medical man be allowed only a certain number of patients, say 300 to 500, and as soon as the number is made up for one doctor then the neighbourhood must choose one of the others.
6. Let any medical man newly starting be drafted to a place where he is required, in the same way as in Germany—the *Apoteker*—corresponding to our dispensing chemist, is appointed to a certain vacant place; or he may take up his stand where there is a vacant place.
7. Let there be a central dépôt for instruments, books, serums, etc., and even a cottage hospital.

In this necessarily brief sketch or outline of a new system of a National Medical Service the advantages are:

1. Prevention of disease rather than the cure of disease, already well established, as in all existing systems, including the National Insurance Act. The question of medical assistance is not left to the lay mind, but is in the hands of the expert—the medical man. Hence great saving of life and suffering.
2. The interests of the public and the medical profession are identical under this system, for it will be to the interest of the medical man to keep his patients well, and he will therefore not be under the ban of benefiting by his patients' ills.
3. The regular salary, like that of a clergyman, will do away with the keeping of a multitude of petty accounts, with all the loss of time, energy, and opportunity such entails, not to speak of the vexation of spirit and the soul-destroying work the obtaining of such means to a sensitive nature, sapping the vital energies, which should be given rather to fitting himself mentally and physically for his arduous day and night duties, and yet which terrible loss to himself, and thus to the public, is the usual lot of the general practitioner.
4. The advantage to the public will be that the great cost of administration of this medical branch of Civil Service will be practically nothing compared with that under the present Insurance Act.
5. The present gross inequalities of justice to public and profession alike will be remedied and adjusted.
   (*a*) The public: A father of a family has to bear all the expenses of the new generation and to support largely the doctors.
   (*b*) The profession: The general practitioners who do the greatest good in protecting the public by treating and notifying disease among the slums of our great towns are often the worst paid, and yet there can be no doubt that the wealthy and middle-class owe their freedom from diseases such as typhoid, scarlatina, diphtheria, etc., to the notifications of diseases by these poor medical men. Such doctors protect the clothes, the food, milk, water, etc., of the public, and are the real medical officers of health, though overworked and underpaid for their great services.

Indeed, the wealthy and middle class do not realize they owe the medical men anything unless they are actually taken ill. This is the great fallacy—interdependent on one another as we are nowadays—of our present system. The fact is, the neighbourhood owes something to every medical man engaged in finding out, notifying, and combating disease in its borders. There is a subtle realization of this point, with the result—under the present system—such classes do all they can to avoid the doctor, going to chemists, quacks, hospitals, and even calling in midwives, rather than availing themselves of the services of the medical men in the district. When really ill they feel caught, knowing that now they have to pay for the health of the neighbourhood. Thus, the doctor's life under this old out-of-date system is a very unhappy one; he is wanted, but on sufferance only—"sufferance is the badge of all our tribe." The householder wishes the doctor to be always ready for him, but does not wish to pay for it.

By suitable taxation the above inequalities to public and profession could be adjusted rightly, and then, instead of having, perhaps, to pay £50 or £60 one year (for example, for operation), the cost would be spread evenly over all the years.

In every way this Civil Service system of national medical aid I have but been able to barely outline would be the most rational way of meeting the great problem of the national health.

MODE AND RATE OF REMUNERATION.

Dr. P. R. COOPER writes with reference to Dr. Haward's letter in the BRITISH MEDICAL JOURNAL SUPPLEMENT, April 13th, p. 383: I am content to let my former reply to Dr. Haward stand, with one slight correction. In regard to the variation in medical fees as compared with the insured's contributions, I had evidently been misinformed by the local secretary of the National Deposit Friendly Society on this point, which I hasten to concede to Dr. Haward. Still, as a matter of personal experience, I have always been paid on the same scale of fees whatever the contributions of the insured, and I imagine few of us ever receive more than the minimum. It is only right to add that I do not advocate the system of the National Deposit Friendly Society as an ideal one, but merely instance it as a proof that payment for work done is practicable, and despite Dr. Haward's criticisms my contention remains unshaken. Dr. Cooper also expresses the opinion that the relationship between doctor and patient should be voluntary on both sides, as in present general practice. Under

the National Insurance Scheme this, he says, could easily be secured by remunerating all doctors who attend upon the insured in accordance with the work actually done by them upon an agreed tariff, the Insurance Fund underwriting the whole or part of the cost of such attendance. This he considers the only equitable mode of remuneration, as it is also the only method of preserving the proper relations between doctor and patient.

THE REPRESENTATIVE MEETING IN FEBRUARY.

DR. C. STENNETT REDMOND (London) writes to express his hearty concurrence with the letters of Dr. W. Gosse and Dr. K. M. Gibbins (SUPPLEMENT, March 23rd). He holds that the Special Representative Meeting was not justified in deciding or even discussing the amount and mode of remuneration, inasmuch as it had no mandate from the Divisions, which had already voted against capitation by a significant majority. As a former Chairman of the Manchester (West) Division he desires to express the pleasure he has derived from reading Dr. Barton's manly defence of Dr. T. A. Helme, and as an old colleague on the combined committee of the Lancashire and Cheshire Divisions cordially endorses his words.

Naval and Military Appointments.

ROYAL NAVY MEDICAL SERVICE.

STAFF SURGEON W. H. DAW has been appointed to the *Doris* (undated).

Surgeon G. B. SCOTT to be Inspector of Sick Berth Staff at the Royal Naval Hospital, Chatham (May 1st).

ARMY MEDICAL SERVICE.

SURGEON-GENERAL T. M. CORKER is appointed Principal Medical Officer, 5th (Poona) Division from February 23rd, vice Surgeon-General J. G. MacNeece.

Surgeon-General M. W. KERIN is appointed Principal Medical Officer, 8th (Lucknow) District, from February 19th, vice Surgeon-General T. M. Corker, transferred.

Colonel C. E. NICOL is appointed Principal Medical Officer, Presidency and Assam Brigades, vice Colonel E. Butt, transferred.

ROYAL ARMY MEDICAL CORPS.

Lieutenant-Colonel W. C. BEEVOR, C.M.G., now serving at Fermoy, has been appointed to the charge of the Royal Infirmary, Dublin, from April 16th, in succession to Lieutenant-Colonel C. Birt, who has been appointed to London for duty.

Lieutenant-Colonel A. J. LUTHER, from Cahir, has been appointed to Fermoy from April 13th.

Major J. H. E. AUSTIN, from the London District, has been appointed to the Scottish Command.

Major J. G. CHURTON has been posted on promotion from Peshawar to Bangalore, and has been succeeded at Peshawar by Captain H. H. Blake.

Captain T. C. C. LESLIE, from Maritzburg, has been posted to the Cork District from April 12th.

Captain G. G. TABUTEAU, from Jhansi, has been posted to the Dublin District from April 18th.

Captain L. A. A. ANDREWS, from Mauritius, has been posted to the Belfast District from April 23rd.

Captain F. H. M. CHAPMAN has been granted leave till November 30th.

Captain D. F. MACKENZIE has been granted eight months' general leave.

SPECIAL RESERVE OF OFFICERS.

JOHN ROLLO HAYMAN, late Cadet, University of London Contingent, Officers' Training Corps, to be Lieutenant (on probation), dated March 13th, 1912.

Cadet EDWARD ALFRED WILSON, from the University of London Contingent, Officers' Training Corps, to be Lieutenant (on probation); dated March 13th, 1912.

Cadet ROBERT GREEN, from the Royal College of Surgeons in Ireland Contingent, Officers' Training Corps, to be Lieutenant (on probation), dated March 22nd, 1912.

INDIAN MEDICAL SERVICE.

LIEUTENANT-COLONEL H. FOOKS has assumed charge of the appointment of Officiating Principal Medical Officer of the Aden Brigade, vice Colonel H. F. Cleveland, who has proceeded on leave.

The services of Major T. E. WATSON, M.B., are replaced at the disposal of His Excellency the Commander-in-Chief in India.

Major T. STODART, M.B., is appointed Civil Surgeon of the First Class, with effect from January 12th, in place of Lieutenant-Colonel A. O. Evans, reverted to military duty.

The services of Major H. A. SMITH, Civil Surgeon at Agra, are placed at the disposal of the Government of India with effect from the date of the expiration of his leave.

Privilege leave for three months, in combination with furlough for six months and study leave for nine months, is granted to Major P. F. CHAPMAN, M.B., C.M., Civil Surgeon, Jubbulpur, with effect from April 1st, 1912.

The services of Captain S. W. JONES are placed temporarily at the disposal of the Government of Bombay for employment in the Gaol Department.

The services of Captain E. W. C. BRADFIELD, M.B., F.R.C.S.E., are placed temporarily at the disposal of the Government of Madras.

The services of Captain F. P. MACKIE, F.R.C.S., are placed at the disposal of the Sanitary Commissioner with the Government of India.

Captain E. T. HARRIS, whose services have been placed temporarily at the disposal of the local government, is posted to general duty in the Rangoon General Hospital.

The undermentioned officers, having completed their courses at the Royal Army Medical College and at Aldershot, have been finally admitted to the service. Their commissions will bear date July 29th, 1911: J. A. SINTON, E. R. ARMSTRONG, D. F. MURPHY, C. J. STOCKER, E. E. DOYLE, C. M. PLUMPTRE, A. W. DUNCAN, L. F. BRANDENBOURG, J. E. SCUDAMORE, H. L. BARKER, E. A. PENNY, G. B. HARLAND.

The King has approved of the retirement of Lieutenant-Colonel ROBERT SHAW, dated December 25th, 1911.

The promotions of the undermentioned Majors of the Indian Medical Service to that rank—notified in the *London Gazette* on the dates shown—are antedated as follows:

From July 29th, 1905 (as notified in the *London Gazette* of May 15th, 1906), to January 30th, 1905: ERNEST ALAN ROBERT NEWMAN, M.D., REGINALD GEORGE TURNER, F.R.C.S., JAMES DAVIDSON, M.D., BHOLA NUTH.

From July 28th, 1906 (as notified in the *London Gazette* of November 13th, 1906), to January 29th, 1906: CHARLES ROSS PEARCE, M.B.

From January 29th, 1907 (as notified in the *London Gazette* of May 7th, 1907), to July 29th, 1906: SAMUEL EVANS, M.B., JAMES HALDANE MCDONALD, M.B.

From July 29th, 1907 (as notified in the *London Gazette* of October 4th, 1907), to January 29th, 1907: ARTHUR FREDERICK WILLIAM KING, F.R.C.S.E., ANDREW ARMSTRONG GIBBS, THOMAS EDGAR WATSON, M.B.

From January 29th, 1908 (as notified in the *London Gazette* of April 10th, 1908), to July 29th, 1907: CLARENCE BARRYMORE HARRISON, M.B., NICHOLAS PURCELL O'CORMAN LALOR, M.B.

From July 29th, 1908 (as notified in the *London Gazette* of October 20th, 1908), to January 29th, 1908: HEBBERT JAMES WALTON, M.D., F.R.C.S., MAXWELL DICK, M.D.

From July 28th, 1909 (as notified in the *London Gazette* of October 5th, 1909), to January 28th, 1909: JOHN GEORGE PATRICK MURRAY, M.D., F.R.C.S.E.

From January 28th, 1910 (as notified in the *London Gazette* of May 3rd, 1910), to July 28th, 1910: ALFRED GEORGE SARGENT.

Lieutenant-Colonel F. P. MAYNARD, Professor of Ophthalmic Surgery, Medical College, and Ophthalmic Surgeon, College Hospital, Calcutta, is granted privilege leave for three months, with furlough for six months in continuation with effect from March 1st, 1912. Major W. V. COPPINGER is appointed to officiate.

Lieutenant-Colonel DEARE is confirmed as Civil Surgeon 1st class, vice Lieutenant-Colonel Clarkson, retired.

Lieutenant-Colonel G. H. BAKER, Civil Surgeon of Fyzabad, has been granted privilege leave, combined with furlough, for a period of two years, with effect from April 2nd.

Lieutenant-Colonel W. VOST, Civil Surgeon, on being relieved, is transferred from Lucknow to Fyzabad.

Lieutenant-Colonel R. J. MARKS, Civil Surgeon, of Gorakhpur, is granted privilege leave, combined with special leave on urgent private affairs, for a total period of six months.

Major W. S. WILLMORE, Civil Surgeon, of Mirzapur, is granted privilege leave, combined with three months' study leave and furlough, for a total period of twenty-one months and two days.

Major STEVENS is appointed Professor of Clinical and Operative Surgery, Calcutta Medical College.

Major E. J. MORGAN, Civil Surgeon, of Sitapur, is granted privilege leave on urgent private affairs for a total period of six months.

Major L. P. STEPHEN on return from leave to do duty as Civil Surgeon, Thana, and Superintendent Narotamdas Madhavdas Lunatic Asylum, Naupada, vice Assistant Surgeon Khan Bahadur F. V. Moos, pending the return from leave of Major K. V. Kukday, or further orders.

Major W. MACM. PEARSON, Civil Surgeon, is transferred from Budaun to Mirzapur.

Major J. N. WALKER, Civil Surgeon, is transferred from Rae Bareli to Gorakhpur.

The services of Major G. BIDIE are replaced at the disposal of the Government of India in the Home Department with effect from May 24th, 1912.

Captain A. D. HAYDON is permitted to retire on half-pay.

Captain R. KNOWLES, Senior Medical Officer, Jhansi, to hold civil medical charge of the district in addition to his military duties.

Captain H. SIMPSON, Medical Officer of the Lawrence Military Asylum, Sanawar, is appointed to officiate as Principal, vice Rev. A. H. Hildesley, in addition to his own duties.

Captain G. C. L. KERANS has been granted furlough leave for one year.

The services of Captain WERNICKE are placed under the Central Provinces Government.

The services of Captain HARKNESS are placed under the Home Department.

The services of Captain BARBER are placed under the United Provinces Government.

The services of Captain J. K. S. FLEMING are replaced at the disposal of His Excellency the Commander-in-Chief in India.

Captain T. C. RUTHERFORD, Civil Surgeon, Bilaspur, is deputed to undergo a course of instruction in malariology at Amritsar.

Captain W. TARR, Civil Surgeon, Nimar, is deputed on special duty at Pachmarhi during the summer season of 1912.

Captain G. FOWLER, Civil Surgeon, Akola, is granted privilege leave for three months, in combination with leave on medical certificate for nine months, with effect from March 1st, 1912.

Captain C. A. GILL, Deputy Sanitary Commissioner, sub *pro tem.*, is granted eighteen months' leave, with effect from March 15th, 1912.

On relief by Captain HUGH WATTS, Captain M. F. REANEY, Civil Surgeon, Wardha, is transferred to Akola.

Captain H. W. ILLIUS, Officiating Civil Surgeon, is transferred from Jhansi to Sitapur.

Honorary Captain G. HYNES, Civil Surgeon, is transferred from Fatehpur to Hardoi.

Honorary Captain J. T. PARKINSON, Civil Surgeon of Hardoi, is granted privilege leave, combined with special leave on urgent private affairs, for total period of six months.

COLONIAL MEDICAL SERVICES.

THE following changes have been notified by the Colonial Office:

WEST AFRICAN MEDICAL STAFF.

New Appointments.—Messrs. M. GROVES, L.M.S.S.A.Lond., and F. G. THOMPSON, M.B.Lond., to be Medical Officers, Gold Coast. Mr. W. BROWNE, L.R.C.P., L.R.C.S.Edin., L.F.P.S.Glas., to be Medical Officer, Southern Nigeria. Mr. W. C. E. BOWER, L.M. and S.Madras, M.R.C.S. Eng., L.R.C.P.Lond., to be Medical Officer, Sierra Leone (reappointment).

Transfers.—J. LUNN, M.B., C.M.Glasg., Medical Officer, Gold Coast, has been appointed an Itinerating Inspecting Officer in the Medical Department of Ceylon.

Retirement.—A. J. A. BROWNE, L.R.C.P., L.R.C.S.Irel., Medical Officer, Southern Nigeria, retires with a gratuity.

Resignation.—J. CROSS, M.B., Ch.B.Glasg., Medical Officer, Southern Nigeria.

OTHER COLONIES AND PROTECTORATES.

Messrs. H. G. HOLDBROOK, M.B., B.Ch., B.A.O.Dubl., N. W. STEINBERG, M.B., Ch.B.Liverpl., W. A. TAYLOR, M.B., Ch.B., B.A.O.Dubl., and J. A. MCILROY, M.R.C.S.Eng., L.R.C.P.Lond., to be Medical Officers, Straits Settlements.

Mr. H. W. TILLING, M.R.C.S.Eng., L.R.C.P.Lond., to be Medical Officer, Gilbert and Ellice Islands.

Vital Statistics.

HEALTH OF ENGLISH TOWNS.

OWING to the inclusion of the recently extended Borough of Cambridge, the Registrar-General's weekly returns will in future relate to ninety-five towns, each of which contained a population exceeding 50,000 persons at the last census. In these ninety-five towns 8,190 births and 4,744 deaths were registered during the week ending Saturday, April 6th. The deaths were equal to an annual rate of mortality of 14.0 per 1,000, compared with 14.6, 14.1, and 14.6 per 1,000 in the ninety-four towns in the three preceding weeks. In London the death-rate did not exceed 13.1 per 1,000 against 12.7, 13.5, and 13.5 in the three previous weeks. Among the ninety-four other large towns the death-rates ranged from 5.7 in Smethwick, 6.2 in Southend-on-Sea, 6.3 in Devonport, 6.4 in Wimbledon, 7.0 in Edmonton, and 7.2 in Enfield to 20.1 in Wakefield, in Barnsley, and in Aberdare, 20.3 in Burnley, 21.3 in Salford, 21.7 in Oldham, and 23.5 in Warrington. Measles caused a death-rate of 1.7 in Manchester, 1.8 in Nottingham, 2.0 in Wakefield, 2.3 in Cardiff, 2.8 in Warrington, 2.9 in Salford, and 4.3 in Newport (Mon.), and whooping-cough of 1.8 in West Ham, 1.9 in Gillingham, in Stockport, and in Huddersfield, 2.1 in Oldham, and 2.5 in Merthyr Tydfil. The mortality from the remaining epidemic diseases showed no marked excess in any of the large towns and no fatal case of small-pox was registered during the week. The causes of 33, or 0.7 per cent. of the deaths registered in the ninety-five towns, were not certified either by a registered medical practitioner or by a coroner after inquest, and included 4 in Birmingham, 4 in Gateshead, 3 in Portsmouth, and 3 in Liverpool. The number of scarlet fever patients under treatment in the Metropolitan Asylums Hospitals and the London Fever Hospital, which had been 1,384, 1,368, and 1,322 at the end of the three preceding weeks, had further declined to 1,263 on Saturday, April 6th; 121 new cases were admitted during the week, against 152, 137, and 133 in the three preceding weeks.

In ninety-five of the largest English towns, 8,556 births and 4,744 deaths were registered during the week ending Saturday, April 13th. The annual rate of mortality in the ninety-four or ninety-five towns, which had been 14.1, 14.6, and 14.0 per 1,000 in the three preceding weeks, was again 14.0 per 1,000 in the week under notice. In London last week the death-rate was equal to 13.5 per 1,000, against 13.5, 13.5, and 13.1 in the three previous weeks. Among the ninety-four other large towns the death-rates ranged from 6.4 in Wallasey, 6.9 in Ilford, 7.4 in Cambridge, 8.1 in Enfield, 8.2 in Reading, and 8.3 in Wimbledon to 19.6 in Oldham, 19.9 in Gateshead, 20.3 in Burnley, 21.1 in Salford, 22.0 in Stockton-on-Tees, and 22.3 in St. Helens. Measles caused a death-rate of 1.8 in Newport (Mon.), 2.0 in Wakefield, 2.1 in Warrington, 3.4 in Cardiff, and 3.6 in Salford; and whooping-cough of 1.1 in West Ham and in Manchester, 1.3 in Southampton, in Salford, and in Gateshead, 1.5 in East Ham, 1.7 in Walsall, 1.9 in Merthyr Tydfil, and 2.3 in Edmonton. The mortality from the remaining epidemic diseases showed no marked excess in any of the large towns. A fatal case of small-pox was registered in Bristol, but none in any other of the ninety-five towns. The causes of 43, or 0.9 per cent., of the total deaths were not certified either by a registered medical practitioner or by a coroner after inquest, and included 9 in Birmingham, 5 in St. Helens, 4 in Liverpool, and 3 in Gateshead. The number of scarlet fever patients under treatment in the Metropolitan Asylums Hospitals and the London Fever Hospital, which had been 1,368, 1,322, and 1,263 at the end of the three preceding weeks, had further declined to 1,242 on Saturday last; 119 new cases were admitted during the week, against 137, 133, and 121 in the three preceding weeks.

HEALTH OF SCOTTISH TOWNS.

IN eighteen of the largest Scottish towns 1,176 births and 674 deaths were registered during the week ending Saturday, April 6th. The annual rate of mortality in these towns, which had been 17.4 and 17.0 per 1,000 in the two previous weeks, again declined to 16.1 per 1,000 in the week under notice, but was 2.1 per 1,000 above the rate recorded in the ninety-five large English towns. Among the several Scottish towns the death-rates ranged from 6.5 in Clydebank, 9.1 in Kirkcaldy, and 9.2 in Govan to 19.2 in Greenock, 19.3 in Dundee, and 19.5 in Kilmarnock. The mortality from the principal infectious diseases averaged 1.7 per 1,000, and was highest in Partick and Kilmarnock. The 255 deaths from all causes recorded in Glasgow included 15 from measles, 3 from whooping-cough, 3 from infantile diarrhoeal diseases, 2 from scarlet fever, and 1 from enteric fever. Six deaths from measles were registered in Leith, 5 in Partick, 4 in Edinburgh, 4 in Paisley, and 3 in Kilmarnock; 2 deaths from scarlet fever in Aberdeen; 2 deaths from diphtheria in Dundee; and 2 deaths from whooping-cough in Aberdeen and 2 in Paisley.

In eighteen of the largest Scottish towns 1,288 births and 693 deaths were registered during the week ending Saturday, April 13th. The annual rate of mortality in these towns, which had been 17.0 and 16.1 per 1,000 in the two previous weeks, rose to 16.6 per 1,000 in the week under notice, and was 2.6 per 1,000 above the rate recorded in the ninety-five large English towns. Among the several Scottish towns, the death-rates last week ranged from 6.1 in Falkirk, 9.8 in Govan, and 10.0 in Motherwell to 23.6 in Coatbridge, 24.9 in Ayr, and 27.0 in Kilmarnock. The mortality from the principal infectious diseases averaged 1.9 per 1,000, and was highest in Kilmarnock and Coatbridge. The 254 deaths from all causes registered in Glasgow included 15 from measles, 3 from whooping-cough, 3 from diphtheria, 3 from infantile diarrhoea, 1 from enteric fever, 1 from typhus, and 1 from scarlet fever. Ten deaths from measles were recorded in Edinburgh, 6 in Paisley, 4 in Coatbridge, 3 in Leith, and 3 in Motherwell; 2 deaths from scarlet fever in Greenock; 2 deaths from diphtheria in Dundee; and 2 from whooping-cough in Coatbridge and 2 in Kilmarnock.

HEALTH OF IRISH TOWNS.

DURING the week ending Saturday, April 6th, 499 births and 464 deaths were registered in the twenty-two principal urban districts of Ireland, as against 636 births and 521 deaths in the preceding week. The annual death-rate in these districts, which had been 24.7, 20.7, and 23.5 per 1,000 in the three preceding weeks, fell to 20.9 per 1,000 in the week under notice, this figure being 6.9 per 1,000 higher than the mean average death-rate in the ninety-five English towns for the corresponding period. The figures in Dublin and Belfast were 25.0 and 19.3 respectively, those in other districts ranging from 6.6 in Queenstown and 9.2 in Ballymena to 34.4 in Lurgan and 36.4 in Wexford, while Cork stood at 24.5, Londonderry at 14.0, Limerick at 13.6, and Waterford at 24.7. The zymotic death-rate in the twenty-two districts averaged 2.1 per 1,000, as against 1.7 in the preceding period.

During the week ending Saturday, April 13th, 675 births and 466 deaths were registered in the twenty-two principal urban districts of Ireland, as against 499 births and 464 deaths in the preceding week. The annual death-rate in these districts, which had been 20.7, 23.5, and 20.9 per 1,000 in the three preceding weeks, rose to 21.0 per 1,000 in the week under notice, this figure being 7.0 per 1,000 higher than the mean average death-rate in the ninety-five English towns for the corresponding period. The figures in Dublin and Belfast were 25.4 and 19.6 respectively, those in other districts ranging from 9.2 in Ballymena and 9.5 in Waterford to 30.1 in Lurgan and 30.5 in Newry, while Cork stood at 20.4, Londonderry at 12.7, and Limerick at 20.4. The zymotic death-rate in the twenty-two districts averaged 1.8 per 1,000, as against 2.1 in the preceding period.

Hospitals and Asylums.

THE CHILDREN'S HOSPITAL, BIRMINGHAM.

THE total number of children treated during 1911 was 15,612, and of these 1,023 were in-patients, 13,342 out-patients, and 1,247 casualties. The total number in 1910 was 15,261. The average detention-rate of in-patients was 20.43 days. There were 131 deaths among in-patients, giving a death-rate of 12.8 per cent. The operations on in-patients numbered 360, and on out-patients 2,067. The expenditure amounted to £5,867 and the income to £5,579, leaving a deficiency of £288. The committee will shortly be in a position to invite tenders for the new buildings. It has at call for the purpose of building and furnishing the sum of about £35,000, but it is anticipated that a further sum of at least £15,000 is still necessary.

BIRMINGHAM AND DISTRICT HOSPITAL FOR WOMEN.

DURING 1911 the number of new cases attending the out-patient department of the Women's Hospital was 4,037, being an increase of 283 on the previous year. The total number of new and old patients treated during the year was 20,425. In the in-patient department 1,032 patients were admitted, and of these 105 were paying patients. The expenditure exceeded the ordinary income by £2,879. The Maternity Hospital, which is now amalgamated with the Women's Hospital, is managed by a separate committee. In the Maternity Hospital during last year 437 in-patients were received, a considerable increase on 1909, when there were 379 patients. The accounts for the year showed a deficiency of £604. Important economies have already been effected by the union of the two hospitals.

SOUTH WIMBLEDON, MERTON AND DISTRICT COTTAGE HOSPITAL.

THE twelfth annual report, recently issued, states that the number of cases treated in the wards was 260, with 13 deaths. There were 156 casualty cases. The average length of each patient's stay was 17 days, as compared with 14 in 1910. The average weekly cost for each in-patient was 19s. 5d. The income for the year was £685 10s. 11d., and the expenditure £673 0s. 9d. The financial statement showed that both the Hospital Sunday and Hospital Saturday Funds had made grants to the hospital, while King Edward's Hospital Fund had made a second grant of £1,000 towards the building fund of the new hospital at Kingston Road, Merton, which is to take the place of the present edifice in Merton Road. The new institution has now been completed, and will, it is hoped, shortly be opened by H.R.H. Princess Louise, Duchess of Argyll. The new hospital will be known as the Nelson Hospital for Wimbledon, Merton, and District.

WESTMORLAND CONSUMPTION SANATORIUM AND HOME.

IT appears from the annual report for 1911 that the Westmorland Consumption Sanatorium accommodates 68 cases of the milder type. The home was built in 1909 to receive cases of advanced phthisis. Together they form one institution, the two grounds being contiguous, so that patients are readily transferred from one branch to the other according to the progress they make. Cases are admitted from outside Westmorland at £2 2s. a week, and beds may be engaged at £90 for twelve months, or at £80 a year when taken definitely for five years. The average number of beds occupied throughout the year was 94, as against 66 in 1910. The average weekly cost of maintenance was 32s., a higher figure than in any of the previous seven years; this was due partly to paying income tax; still a balance of over

£1,500 was placed to the credit of the institutions. According to the medical superintendent's report, 309 patients were admitted during 1911, 127 females and 182 males. Of these, 22 were children of 14 years and under. Of the 309 patients, 110, or 35.6 per cent., were in the first stage of the disease; 70, or 22.7 per cent., were in the second stage; and 120, or 41.7, in the third stage. Tubercle bacilli were found in 60 per cent. of all cases admitted, a larger proportion than in former years. Tuberculin was used extensively both as a diagnostic and curative agent. Von Pirquet's test was employed in 150 cases of all kinds in order to determine whether it is reliable. Although the number of tests is not large enough to afford conclusive evidence, Dr. Wallace considers that it is a diagnostic test of great value. In cases in which tubercle bacilli were present in sputum, the test was positive in 96 per cent. As a curative agent tuberculin has been used extensively, but Dr. Henderson has not yet accumulated sufficient data to speak positively as to its value. No attempt has been made to follow up discharged cases, except those admitted from Westmorland. Of the advanced cases, only 14 out of 90 admitted during the first seven years remain alive. Of the moderately severe cases, about 60 per cent. are in good health, 20 per cent. frail, and 20 per cent. dead. Of the slight cases, about 90 per cent. are in excellent health, and are doing as well as they could wish.

MONKSTOWN HOSPITAL, DUBLIN.

THE report read at the annual meeting of the Monkstown Hospital stated that 232 patients had been admitted, and 1,964 patients treated at the dispensary. The number of attendances at the dispensary and accident ward were 4,798 and 3,519 respectively, an increase of nearly 2,000 over 1910. The subscriptions, unfortunately, had fallen off to the extent of between £500 and £600. The chairman spoke of the serious effect that the National Insurance Act must be expected to have on the funds of such an institution, and said that the people in Ireland must not forget that, so far as that country was concerned, medical benefits were not included, so even when the Act came into force the poor in times of ill-health and trouble would be just as dependent on the hospitals as they were at present.

Vacancies and Appointments.

VACANCIES.

WARNING NOTICE.—Attention is called to a Notice (see Index to Advertisements—Warning Notice) appearing in our advertisement columns, giving particulars of vacancies as to which inquiries should be made before application.

AGRA: DUFFERIN HOSPITALS AND FEMALE MEDICAL SCHOOL.—Senior Lady Doctor for the Dufferin Hospitals, Agra. Pay, inclusive of allowances, Rs. 400 (£26 13s. 4d.) per mensem.

BEDFORD COUNTY HOSPITAL.—Male Assistant House-Surgeon. Salary, £80 per annum.

BIRMINGHAM LYING-IN CHARITY.—Honorary District Surgeon.

BOOTLE BOROUGH HOSPITAL.—Junior House-Surgeon. Salary, £80 per annum.

BRADFORD CHILDREN'S HOSPITAL.—House-Surgeon (male). Salary, £100 per annum.

BRENTFORD UNION.—Second Assistant to the Medical Superintendent of the Infirmary Workhouse and Schools. Salary, £125 per annum.

BURNLEY COUNTY BOROUGH.—Assistant to the Medical Officer of Health. Salary, £250 per annum, rising to £300.

BURNLEY UNION.—Resident Assistant Medical Officer as Assistant to the non-resident Medical Officer of the Workhouse. Salary, £150 per annum.

BURY INFIRMARY.—Junior House-Surgeon. Salary, £80 per annum, increasing to £90 after six months.

BURY ST. EDMUNDS: WEST SUFFOLK GENERAL HOSPITAL.—Resident Medical Officer. Salary, £100 per annum.

BUXTON: DEVONSHIRE HOSPITAL.—Pathologist (non-resident). Salary, £250 per annum.

CANCER HOSPITAL, Fulham Road, S.W.—Assistant Anaesthetist. Honorarium, 25 guineas per annum.

CHARING CROSS HOSPITAL MEDICAL SCHOOL.—Demonstrator in Pathology. Salary, £150 per annum.

CHORLEY: RAWCLIFFE HOSPITAL.—House-Surgeon. Salary, £100 per annum.

DENBIGH: DENBIGHSHIRE INFIRMARY.—House-Surgeon. Salary, £100 per annum.

DORCHESTER: DORSET COUNTY HOSPITAL.—House-Surgeon. Salary, £100 per annum.

DUDLEY: GUEST HOSPITAL.—Senior Resident Medical Officer. Salary, 100 guineas per annum, increasing to 120 guineas.

DUNDEE DISTRICT ASYLUM.—(1) Senior Resident Medical Officer. (2) Junior Resident Medical Officer. Salary, £150 and £120 per annum respectively, rising to £200 and £150.

EVELINA HOSPITAL FOR SICK CHILDREN, Southwark, S.E.—(1) House-Surgeon; salary at the rate of £75 per annum. (2) Aural Surgeon.

EWELL: EPILEPTIC COLONY.—Junior Assistant Medical Officer. Salary at the rate of £170 per annum.

HOSPITAL OF ST. JOHN AND ST. ELIZABETH, Grove End Road, N.W.—Resident Medical Officer. Salary at the rate of £80 per annum.

HUDDERSFIELD ROYAL INFIRMARY.—Junior House-Surgeon. Salary, £60 per annum.

ISLE OF MAN ASYLUMS BOARD.—Assistant Medical Officer for Isle of Man Lunatic Asylum and Home for Poor. Salary, £150 per annum.

LEAMINGTON: WARNEFORD, LEAMINGTON, AND SOUTH WARWICKSHIRE GENERAL HOSPITAL.—House-Surgeon. Salary, £100 per annum.

LEEDS GENERAL INFIRMARY.—(1) Resident Medical Officer at the Ida and Robert Arthrington Hospitals; salary, £30 for six months. (2) Resident Obstetric Officer. (3) House-Surgeon. (4) House-Physician.

LEEDS TUBERCULOSIS ASSOCIATION.—Resident Medical Officer for the Sanatorium at Gateforth. Salary at the rate of £100 per annum.

LEICESTER INFIRMARY.—(1) House-Surgeon; (2) Assistant House-Surgeon. Salary at the rate of £120 and £80 per annum respectively.

LINCOLN COUNTY HOSPITAL.—Junior Male House-Surgeon. Salary at the rate of £100 per annum.

LIVERPOOL INFECTIOUS DISEASES HOSPITAL.—Assistant Resident Medical Officer. Salary, £120 per annum.

LONDON TEMPERANCE HOSPITAL, Hampstead Road, N.W.—Resident Medical Officer. Honorarium at the rate of 50 guineas per annum.

LOUGHBOROUGH AND DISTRICT GENERAL HOSPITAL AND DISPENSARY.—Male Resident House-Surgeon. Salary, £120 per annum, increasing by £10 if re-elected for second year.

MACCLESFIELD GENERAL INFIRMARY.—Senior House-Surgeon. Salary, £100 per annum.

METROPOLITAN EAR, NOSE, AND THROAT HOSPITAL, Grafton Street, W.—(1) Assistant Surgeon; (2) Clinical Assistants.

NORTHUMBERLAND HOUSE, Finsbury Park, N.—Medical Superintendent. Salary, £300 per annum, rising to £400.

NORWICH: NORFOLK AND NORWICH HOSPITAL.—House-Surgeon. Salary, £80 per annum.

PASSMORE EDWARDS HOSPITAL, Willesden.—Four members of the Honorary Medical Staff.

PLAISTOW: ST. MARY'S HOSPITAL FOR WOMEN AND CHILDREN.—Assistant Resident Medical Officer. Salary at the rate of £80 per annum.

ROCHESTER: ST. BARTHOLOMEW'S HOSPITAL.—(1) Resident House-Surgeon. (2) Resident House-Physician. Salary at the rate of £150 and £110 per annum respectively.

ROYAL WESTMINSTER OPHTHALMIC HOSPITAL, King William Street, W.C.—(1) House-Surgeon. (2) Assistant House-Surgeon. Salary at the rate of £25 and £20 for six months respectively.

ST. AUSTELL UNION AND RURAL DISTRICT COUNCIL.—Medical Officer to the Workhouse and three Scattered Homes, and Medical Officer of Health for the Rural District. Combined salary, £390 per annum and fees estimated at £10.

SALFORD ROYAL HOSPITAL.—Junior House-Surgeon (Male). Salary at the rate of £65 per annum.

SOUTHAMPTON UNION.—Resident Assistant Male Medical Officer of the Workhouse Infirmary. Salary, £130 per annum, increasing to £150.

STAFFORD: STAFFORDSHIRE GENERAL INFIRMARY.—House-Physician. Salary, £82 per annum, and £5 honorarium after six months' approved service.

STOCKPORT INFIRMARY.—Junior House-Surgeon. Salary, £80 per annum.

STOKE-ON-TRENT AND STOKE RURAL JOINT HOSPITAL BOARD.—Resident (Lady) Assistant Medical Officer for the Infectious Diseases Hospital. Salary, £100 per annum.

STORNOWAY PARISH COUNCIL.—Medical Officer. Salary, £67 per annum, together with £2 10s. as Public Vaccinator, and £2 10s. for services under the Lunacy Act.

SUNDERLAND ROYAL INFIRMARY.—Junior House-Surgeon (Male). Salary at the rate of £80 per annum.

TORQUAY: TORBAY HOSPITAL.—Resident Medical Officer. Salary, £100 per annum, and £5 for lectures to nurses.

UNIVERSITY COLLEGE HOSPITAL, Gower Street, W.C.—Resident Medical Officer.

WAKEFIELD GENERAL HOSPITAL.—(1) Senior House-Surgeon. (2) Junior House-Surgeon. Salary, £120 and £100 per annum respectively.

WESTMINSTER HOSPITAL, Broad Sanctuary, S.W.—Assistant Physician.

WINCHESTER: ROYAL HAMPSHIRE COUNTY HOSPITAL.—(1) House-Physician; (2) House-Surgeon (Males). Salary, £80 per annum each.

WOLVERHAMPTON AND STAFFORDSHIRE GENERAL HOSPITAL.—(1) Resident Medical Officer. (2) House-Surgeon. Salary at the rate of £100 and £80 per annum respectively.

CERTIFYING FACTORY SURGEONS.—The Chief Inspector of Factories announces the following vacant appointments: Bath (Somersetshire), and Croom (co. Limerick).

This list of vacancies is compiled from our advertisement columns, where full particulars will be found. To ensure notice in this column, advertisements must be received not later than the first post on Wednesday morning.

APPOINTMENTS.

AIKEN, D., M.B., Resident Assistant Medical Officer, Toxteth Park Workhouse.

ANDERSON, J. G., L.R.C.P.Edin., L.F.P.S.Glas., District Surgeon and Health Officer for the District of Portshepstone, Natal.

BRAY, P. Dean, M.R.C.S., Honorary Medical Officer of the Blayney Hospital, New South Wales.

BUCHANAN, James S., F.R.C.S., Honorary Surgeon to the Alfred Hospital, Victoria.

CLARKE, Cyril Lowther, M.B.Melb., Medical Officer to the Board of Health, Petersburg, South Australia.

CORDNER, E. R., M.B.Melb., Registrar of the Melbourne Hospital, Victoria.

DARROCH, Margaret, B S., M B., B.S.Glas., Resident Medical Officer to the Children's Hospital of the Royal Infirmary, Sunderland.

DOBSON, Margaret, M.D.Lond., Medical Officer to the West London District Schools, Hanwell, and Dentist to the Ealing School Clinics.

FELDMAN, W. M., M.B., B.S.Lond., M.R.C.S., L.R.C.P.Lond., Non-resident House-Surgeon to West London Hospital.

FORTUNE, J., M.D., Medical Officer of Health, Borough of Newcastle-under-Lyme.

GILL, J. L., M.B., B.S., Junior Resident Medical Officer at the Perth Public Hospital, West Australia.

GILRAY, Thomas, M.B.New Zealand, Medical Superintendent at Napier Hospital, New Zealand.

JEAFFRESON, D., L.R.C.P. and S.Edin., L.F.P.S.Glas., Certifying Factory Surgeon for the Blisworth District, co. Northants.

JUTTNER, F. E., M.B., Ch.B.Melb., Medical Officer of Health for Truro, South Australia.

MARR, A. S., L.R.C.P. and S Edin., Honorary Medical Officer of the Blayney Hospital, New South Wales.

MOORE, Henry, L.R.C.P. and S.Irel., Surgeon to the Lock Hospital, Dublin, vice Henry Fitzgibbon, M.D.T.C.D.

MORTON, E., M.D.Edin., Medical Officer, North Oxfordshire United Districts.

NICHOLL, E. E., M.R.C.S., L.R.C.P., Medical Officer of Health, Borough of South Molton.

RIDLEY, W. R., M.B., Ch.B.Edin., House Physician to the Royal Infirmary, Sunderland.

ROBERTSON, F. G., M.B.Syd., Medical Officer at Collarenebi Hospital, New South Wales.

ROGERS, A. B., L.S.A., Certifying Factory Surgeon for the Cliffe District, co. Kent.

SELDON, W., M.B.Syd., Medical Officer, Warren Hospital, New South Wales.

SPARGO, Ernest, M.B.Melb., Junior Resident Medical Officer to the Alfred Hospital, Melbourne.

THOMAS, E. B., M.B.Adelaide, Junior Resident Surgeon, Broken Hill Hospital, New South Wales.

THOMSON, C. S., M.B., Ch.B.Glas., Certifying Factory Surgeon for the Workington District, co. Cumberland.

TYMMS, A. S. M., M.B.Melb., Registrar of the Melbourne Hospital, Victoria.

VIEYRA, P., M.B., Ch.B.Edin., Junior House-Surgeon to the Royal Infirmary, Sunderland.

WHITFORD, Raymond, M.B.Melb., Junior Resident Medical Officer to the Alfred Hospital, Melbourne.

WILLIAMS, W. H., M.B., Certifying Factory Surgeon for the Monmouth No. 2 District, co. Monmouth.

BIRTHS, MARRIAGES, AND DEATHS.

The charge for inserting announcements of Births, Marriages, and Deaths is 3s. 6d., which sum should be forwarded in Post Office Orders or Stamps with the notice not later than Wednesday morning in order to ensure insertion in the current issue.

BIRTH.

WATT.—On April 14th, at 59, East Dulwich Road, S.E., the wife of Mitchell Watt, M.B., of a daughter.

MARRIAGES.

HOWELL–LITHERLAND.—On April 10th, at All Saints' Church, Southport, by the Rev. S. Howell, B.A., Vicar of Maenclochog, Pembrokeshire, brother of the bridegroom, assisted by the Rev. Dr. Porter, Vicar of All Saints', and the Rev. J. H. Jackson, B.A., Alfred Howell, M.D., of Cardiff, to Florence Louise, eldest daughter of Frederick Litherland, Esq., of Montrose, Higher Crumpsall, Manchester.

YOUNG–KENNEDY.—On April 3rd, at All Souls', Langham Place, Robert Arthur Young, M.D., B.Sc., F.R.C.P., to Fanny Caroline Phoebe, second daughter of the late R. M. Kennedy, Indian Civil Service, and Mrs. Kennedy, 7, Albion Road, Sutton, Surrey.

DEATHS.

ADDISON.—At Hampstead, on April 11th, of meningitis, Paul Fanthorpe, youngest child of Christopher Addison, M.P., and Isobel Addison, aged 2 years and 7 months.

CAMPBELL.—Donald Campbell, M.D., died on April 14th, 1912, at his residence, Lornecliff, Calne, aged 70.

HOLMAN.—On April 13th, at Lydfords, East Hoathly, Sussex, Henry Colgate Holman, M.R.C.S.Eng., L.S.A., in his 80th year.

PUBLISHERS' ANNOUNCEMENTS.

MESSRS. P. BLAKISTON'S SON AND CO. announce the publication of a *Compend of Human Physiology* (13th edition) by Albert P. Brubaker, A.M., M.D., Professor of Physiology and Medical Jurisprudence at Jefferson Medical College, Philadelphia.

During the spring Messrs. J. and A. Churchill will publish the following works: *Hare Lip and Cleft Palate*, by James Berry, F.R.C.S., and T. P. Legg, F.R.C.S., with 250 illustrations; *Pathology, General and Special, for Students of Medicine* (third edition), by R. Tanner Hewlett, M.D., F.R.C.P., illustrated; *Volumetric Analysis for Pharmaceutical Students*, by C. H. Hampshire, illustrated.

Among the forthcoming works announced in Mr. Murray's Quarterly List for April are the following: *The Treatment of Tuberculosis by Means of Carl Spengler's Immune Substances (I.K.) Therapy*, an introduction to Carl Spengler's work on immunity and tuberculosis, by Walter H. Fearis, formerly Demonstrator of Botany, University College, Reading, with a foreword by Dr. Carl Spengler. *Further Researches into induced Cell-reproduction and Cancer* (the McFadden researches), by H. C. Ross, M.R.C.S.Eng., L.R.C.P.Lond., assisted by J. W. Cropper, M.B., M.Sc.Liverpool, M.R.C.S.Eng., L.R.C.P.Lond. Vol. ii, with illustrations.

Messrs. Cassell and Co. announce for publication early in May new editions of Hutchison and Rainy's *Clinical Methods*, and Mitchell Bruce's *Materia Medica*; in the revision of *Materia Medica* Dr. Mitchell Bruce has had the advantage of the collaboration of Dr. Walter J. Dilling, Lecturer on Pharmacology in the University of Aberdeen.

RECENT PUBLICATIONS.

Description, emploi, et valeur en clientèle des traitements nouveaux. Par Dr. Roger Hyvert. Paris: Maloine. 1912. (Crown 8vo, pp 340. Price Fr.4.50.)

A pharmacological list of the newer remedies by way of supplement to the author's *Vade mecum du jeune praticien.* The remedies mentioned include both drugs whose composition is fully known and those which are in the nature of proprietary medicines. In some cases an attempt is made to assess the value of the treatment described, but in no cases is the information very detailed.

Essentials of Medicine. A Textbook of Medicine for Students beginning a Medical Course, for Nurses and for all others interested in the Care of the Sick. By Charles Phillips Emerson, M.D. Second edition. Philadelphia and London: J. B. Lippincott Company. 1911. (Medium 8vo, pp. 412; 117 illustrations. Price 8s. 6d. net.)

The object appears to be to give students, nurses, and the lay public an insight into the pathology of disease and the principles of treatment, and to those who desire to have an intelligent knowledge of disease it will be useful. It has helpful illustrations, and since details of treatment are not given, those who read it are not likely to begin treating patients on their own responsibility.

DIARY FOR THE WEEK.

MONDAY.

MEDICAL SOCIETY OF LONDON, 11, Chandos Street, Cavendish Square, W., 8.30 p.m.—(1) Dr. Dudley Buxton: The Vital Phenomena—Nervous, Circulatory, Respiratory, and Metabolic—Occurring under Anaesthesia, and their Relation to the Safety of the Patient. (2) Mr. E. M. Corner: The Occurrence of so-called Delayed Chloroform Poisoning.

ROYAL SOCIETY OF MEDICINE:

ODONTOLOGICAL SECTION, 15, Cavendish Square, W., 8 p.m.—Paper: Mr. W. McAdam Eccles and Mr. G. Hopewell-Smith: Teeth in Ovarian Dermoid Cysts. Casual Communication:—Mr. E. G. Betts: The Complete Eruption into Place of a Devitalized Tooth.

TUESDAY.

ST. JOHN'S HOSPITAL FOR DISEASES OF THE SKIN, 6 p.m.—Mr. W. Hampson: Electricity-Cataphoresis.

ROYAL SOCIETY OF MEDICINE:

MEDICAL SECTION, 15, Cavendish Square, W., 5.30 p.m.—Paper:—Dr. Gordon Ward: Nodular Leukaemia.

WEDNESDAY.

HUNTERIAN SOCIETY, London Institution, Finsbury Circus, E.C., 9 p.m.—Adjourned Discussion on the Therapeutic Value of Alcohol. The President (Dr. Hingston Fox), Sir T. Lauder Brunton, Mr. C. Mansell Moullin, Dr. Stoddart, Dr. E. W. Goodall, Dr. Langdon Brown, Dr. Currie. Sir Victor Horsley will reply.

FRIDAY.

ROYAL SOCIETY OF MEDICINE:

SECTION FOR THE STUDY OF DISEASE IN CHILDREN, 11, Chandos Street, W., 4.30 p.m.—(1) Exhibition of Cases. (2) Paper:—Dr. E. Cautley: Mucous Gastritis in Infants.

EPIDEMIOLOGICAL SECTION, 15, Cavendish Square, W., 8.30 p.m.—Paper:—Dr. C. Rundle: The "Bed Isolation" of Cases of Infectious Disease.

POST-GRADUATE COURSES AND LECTURES.

LONDON SCHOOL OF CLINICAL MEDICINE, Seamen's Hospital, Greenwich.—Daily arrangements: Out-patient Demonstration, 10 a.m.; Medical and Surgical Clinics, 2.15 p.m. and 3.15 p.m. respectively; Operations, 2 p.m. Special Clinics: Ear and Throat, at noon and 4.30 p.m., Monday, and noon, Thursday; Skin, at noon and 4 p.m., Tuesday, and noon, Friday. Eye, 11 a.m., Wednesday and Saturday. Radiography, Saturday, 10 a.m. Pathological Demonstration, Saturday, 11 a.m.

MANCHESTER: ANCOATS HOSPITAL POST-GRADUATE CLINIC.—Thursday, 4.15 p.m.—Management of Dyspeptic Infants.

WEST LONDON POST-GRADUATE COLLEGE, Hammersmith Road, W.—Medical and Surgical Clinics, X Rays, and Operations, 2 p.m. daily. Monday: Gynaecology, 10 a.m.; Eye, 2 p.m. Tuesday: Gynaecological Operations, 10 a.m.; Throat, Nose, and Ear, 2 p.m.; Skin, 2 p.m. Wednesday: Diseases of Children, 10 a.m.; Throat, Nose, and Ear Operations, 10 a.m.; Eye, 2 p.m.; Gynaecology, 2 p.m. Thursday: Eye, 2 p.m.; Orthopaedics, 2 p.m. Friday: Gynaecological Operations, 10 a.m.; Throat, Nose, and Ear, 2 p.m.; Skin, 2 p.m. Saturday: Diseases of Children, 10 a.m.; Throat, Nose, and Ear Operations, 10 a.m.; Eye, 10 a.m.

CALENDAR OF THE ASSOCIATION.

Date.	Meetings to be Held.
APRIL.	
21 Sunday ..	
22 MONDAY ..	
23 TUESDAY ..	
24 WEDNESDAY	BATH AND BRISTOL BRANCH, Ordinary Meeting, Museum, Bath, 8 p.m. RICHMOND DIVISION, *Metropolitan Counties Branch*, Richmond, 8.30 p.m.
25 THURSDAY..	STATE SICKNESS INSURANCE COMMITTEE (*probably*). EAST ANGLIAN BRANCH, Spring Meeting, East Dereham. SOUTH-WEST ESSEX DIVISION, *Metropolitan Counties Branch*, Walthamstow Hospital, 4 p.m. MARYLEBONE DIVISION, *Metropolitan Counties Branch*, Rooms of the Medical Society of London, 11, Chandos Street, W., Meeting of Medical Practitioners (National Insurance Act), 4.30 p.m.; General Meeting, 5 p.m.; Special Meeting at conclusion of General Meeting. STAFFORDSHIRE BRANCH, General Meeting, Victoria Hotel, Wolverhampton, 5.35 p.m.; Dinner, 7 p.m. CITY DIVISION, *Metropolitan Counties Branch*, General Meeting, Brooke House, Upper Clapton, 9 p.m. WORCESTERSHIRE AND HEREFORDSHIRE BRANCH, Spring Meeting, Worcester.
26 FRIDAY ..	BIRMINGHAM BRANCH, Pathological and Clinical Section, Medical Institute, Edmund Street, 8 p.m.
27 SATURDAY ..	
28 Sunday ..	
29 MONDAY ..	
30 TUESDAY ..	
MAY.	
1 WEDNESDAY	**Central Council, London, 2 p.m.**
2 THURSDAY..	
3 FRIDAY ..	
4 SATURDAY ..	Nominations for election to Central Council to be forwarded to the Financial Secretary and Business Manager.
5 Sunday ..	
6 MONDAY .	
7 TUESDAY ..	
8 WEDNESDAY	GLASGOW AND WEST OF SCOTLAND BRANCH, Annual Meeting, Pathological Institute, Royal Infirmary, Glasgow, 4 p.m.
9 THURSDAY..	

Date.	Meetings to be Held.
MAY *(continued)*.	
10 FRIDAY ..	
11 SATURDAY ..	
12 Sunday ..	
13 MONDAY ..	
14 TUESDAY ..	
15 WEDNESDAY	CENTRAL DIVISION, *Birmingham Branch*, Annual Meeting, Medical Institute, 4 p.m.
16 THURSDAY..	LONDON: Metropolitan Counties Branch, Council, 4 p.m.
17 FRIDAY ..	
18 SATURDAY ..	Last day for receipt of nominations for Central Council.
19 Sunday ..	
20 MONDAY ..	
21 TUESDAY ..	BRIGHTON DIVISION, *South-Eastern Branch*, Ordinary Meeting.
22 WEDNESDAY	RICHMOND DIVISION, *Metropolitan Counties Branch*, Richmond, 8.30 p.m.
23 THURSDAY..	WALTHAMSTOW DIVISION, *Metropolitan Counties Branch*, Wesleyan Church School, Leyton, 4 p.m.
24 FRIDAY ..	
25 SATURDAY ..	List of nominations for election on Central Council will be published in the JOURNAL.
26 Sunday ..	
27 MONDAY ..	
28 TUESDAY ..	
29 WEDNESDAY	BATH AND BRISTOL BRANCH, Annual Meeting, Bristol.
30 THURSDAY..	
31 FRIDAY ..	
JUNE.	
1 SATURDAY ..	
2 Sunday ..	
3 MONDAY ..	
4 TUESDAY ..	
5 WEDNESDAY	

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